



BASEBALL ACADEMY LLC

Information Sheet

Player: _____, _____ Date: ___/___/_____
Last Name First Name

Parents Names: _____ E-mail: _____
Mother Father

Address: _____

City St Zip

Phone #'s: () _____ - _____
Home
() _____ - _____
Cell Mother
() _____ - _____
Cell Father

Emergency Information:

Contact Name: 1- _____ Relationship: _____ Phone #() _____ - _____
Contact Name: 2- _____ Relationship: _____ Phone #() _____ - _____

This information is purely for records purposes. We will take the information and enter it into our database for billing purposes. We will keep the information on file in the case of any emergencies. We need the e-mail address to make sure that we can e-mail your copy of your invoice.

Thank you in advance and we look forward to working with you.

Mike Wallerich

Over the Wall: Baseball Academy, LLC

Pre-Registration

*If you would like a quote for different amounts of sessions, please feel free to contact us.

**Cancellation Policy: To cancel a lesson, Over the Wall needs one week notice to reschedule someone in your time slot. The only exception is an unforeseeable issue: Emergency family issue. Being late just cuts into your time slot unless there isn't another lesson scheduled after.

Player(s) Participating: _____

Group? : 2 3 4 Names of others: _____

Lessons Wanted: **Hitting** **Fielding** **Pitching** **Catching**
Session Amounts: **One** **Four** **Ten** **Other** (if other, call for a quote before you send this back)

Check the Pricing List attached with this e-mail to determine what your costs are, or feel free to call for the price.

Check #: _____ Amount: \$ _____.____ Signature: _____

By Signing this, I know Agree to the terms above of this contract with Over the Wall: Baseball Academy, LLC.