

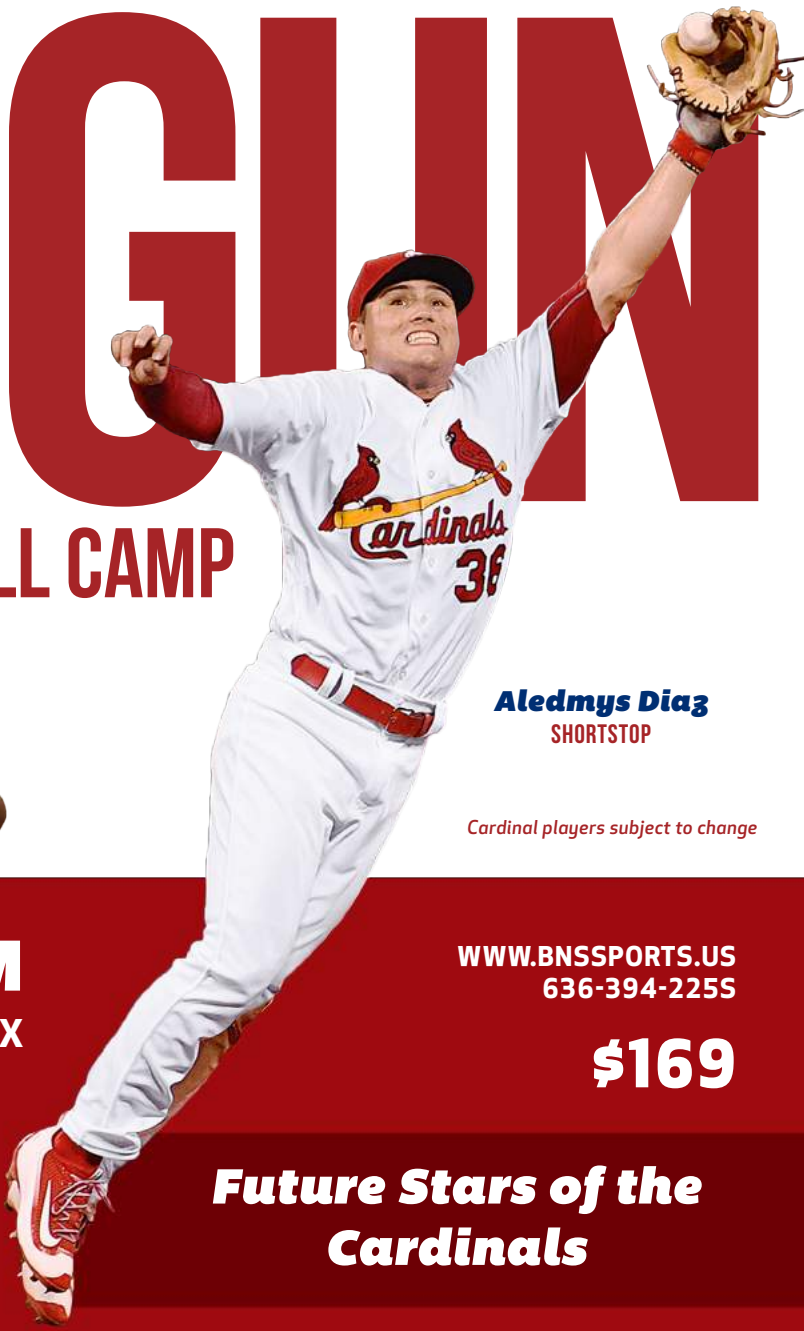


# TOP GUN

## BASEBALL CAMP



**Alex Reyes**  
PITCHER



**Aledmys Diaz**  
SHORTSTOP

Cardinal players subject to change

**JUNE 12-15 • 9AM-12PM**

**CHESTERFIELD VALLEY ATHLETIC COMPLEX**

Don't miss out on the opportunity to participate in this dynamic summer camp week that will cover all facets of the game. Players will be taken through a series of teaching drills each day! All instructors are certified and have played a minimum of college baseball.

Campers should bring a hat, glove, bat and water bottle. (Label all equipment)

**WWW.BNSSPORTS.US**  
**636-394-2255**

**\$169**

**Future Stars of the Cardinals**

### 2017 TOP GUN CAMP REGISTRATION FORM

Send form completed in its entirety with check or credit card info to: Balls-n-Strikes • 203B Ramsey Lane • Ballwin, MO 63021 • Fax 636.394.2256

**REGISTER ONLINE AT [WWW.BNSSPORTS.US/BALLWIN.PHP](http://WWW.BNSSPORTS.US/BALLWIN.PHP)**

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_ Group Me With \_\_\_\_\_

Email \_\_\_\_\_

Parent/Guardian Name & Signature \_\_\_\_\_

I hereby authorize the director of the Balls-n-Strikes camp to act for me according to his/her best judgment in an emergency requiring medical attention. I know of no mental or physical problems, which might affect my child's ability to safely participate in this camp. I will be responsible for any medical or any other charges in connection with his attendance at camp. I agree to abide by the rules and regulations of the camp.

Credit Card # (MC, VISA, Discover) \_\_\_\_\_ Exp \_\_\_\_\_ / \_\_\_\_\_ 3 Digit Code \_\_\_\_\_

Credit Card Signature \_\_\_\_\_