



2012 Winter Camp

Register today for the 13th annual Balls-N-Strikes Winter Camp. This dynamic program will take players through teaching rotations each day including hitting, fielding, agility and cageball! Campers are grouped in six with one instructor. Each session runs 2.5 hours per day for three consecutive days. The camp has sold out for 10 consecutive years. Requests to be with groups, teammate and friend can be accommodated. Grab you gear and meet us for a fun-filled, action-packed program over the holiday break!

*Sign up for both sessions for a full day of baseball and fun! \$220 for both sessions.

| | | | | | | | |
|--|--|--|-----------|------------------------|-------------|-------|------|
| 2012 Winter Camp - \$120 per session | | (mail or fax this portion back to Balls-n-Strikes Brentwood) | | | | | |
| Player(s) Name(s) _____ | | DOB _____ | | | | | |
| Address _____ | | | | | | | |
| City _____ | | State _____ | Zip _____ | | | | |
| Phone H _____ | | Phone W _____ | | | | | |
| Phone C _____ | | Email _____ | | | | | |
| Parent/Guardian Signature _____ | | | | | | | |
| <p>I hereby authorize the director of Balls-n-Strikes camp to act for me according to his/her best judgement in an emergency requiring medical attention.</p> <p>I know of no mental or physical problems, which might affect my child's ability to safely participate in this sport. I will be responsible for any medical or any other charges in connection with our attendance at this facility. I agree to abide by the rules and regulations of this facility.</p> | | | | | | | |
| December 26th-28th | | Session 1 <input type="checkbox"/> 9:00am-11:30am Session 2 <input type="checkbox"/> 12:00pm-2:30pm | | | | | |
| Name on card _____ | | | | | | | |
| Credit Card # (MC, VISA, Discover) _____ | | | | | | | |
| Expiration Date _____ | | Security Code _____ | | | | | |
| Credit Card Signature _____ | | | | | | | |
| Partner Me With _____ | | | | | | | |
| | | <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>I am paying by:</td> </tr> <tr> <td>Credit Card</td> </tr> <tr> <td>Check</td> </tr> <tr> <td>Cash</td> </tr> </table> | | I am paying by: | Credit Card | Check | Cash |
| I am paying by: | | | | | | | |
| Credit Card | | | | | | | |
| Check | | | | | | | |
| Cash | | | | | | | |
| *If your requested class date or time is full, you will be contacted immediately to reschedule | | | | | | | |

Mail completed form to: **Balls-n-Strikes Brentwood, 1427 Strassner Drive, Brentwood, MO, 63144**

Fax completed form to: **314-963-1125**

www.bnssports.us