# League Enrollment

**Student Name:** _____ _____ **Date of Birth:** _____
Last First

**Address:** _____ _____ _____ _____
Street City State Zip

**Phone #:** _____ **Years of Experience:** _____ **Sport:** ☐ Baseball ☐ Softball

**Parent/Guardian Information:**

**Address & Phone Number:** _____

(if different than above) _____

**E-Mail Address:** _____

WAIVER/EXCLUSION CLAUSE: I, the undersigned parent/guardian/participant, in enrolling at Elite, understand that he/she/I in attending any Elite program and using the facilities does so at his/her/my own risk. Elite, and its owners, employees and agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant and his/her/my family in or about any programs on the premises. Participants and parents assume full responsibility for all injuries and damages which may occur in or about any programs on the premises and he/she/I do or does hereby fully and forever release, discharge and hold harmless Elite, all associated facilities and its owners, employees and agents from any and all claims, demands, damages, rights of action, present or future resulting from or arising out of any person's participation in any programs or use of the Elite facilities. In addition, he/she/I agree(s) to follow the rules of play and conduct set by Elite. He/she/I understand(s) that failure to do so may result in suspension from participation. CONSENT: I, the undersigned parent of/guardian of/participant do hereby grant authority to the staff of Elite to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I hereby authorize Elite and its assigns to utilize any and all photographs, pictures or other likeness of the participant, as they deem appropriate in its promotional materials.

Signed _____ Dated _____

☐ **Baseball League: Cost: $125.00 per player, $1000 per team**
**Session #:_____ Age group:_____**

☐ **Softball League: Cost $125.00 per player, $1000 per team**
**Session #: _____**

☐ **Developmental League: Cost $160 - 8 weeks, $25 per session**
**Session #:_____**

***Like any other sports leagues in town, Elite must rely on the assistance of the parents to make our leagues a success. Please consider coaching a team.***

☐ **Yes, I am interested in coaching Name: _____**

Amount Paid: _____ Discount & Reason _____ Method of Payment: _____

Mail to: Elite Baseball and Softball Training 1100 Hynes SW, Grand Rapids, MI 49507