

One on One Fundamentals Registration Form

Name: _____ Email: _____

Address: _____ Age:/Grade _____

City: _____ State: _____ Zip Code: _____

Home Phone: () _____

Email: _____

Cell Phone: () _____

POSITION: _____

PITCHER YES NO (please circle)

CATCHER YES NO (please circle)

OTHER COMMITMENTS: _____

Liability Release Form

I/We the parent(s)/guardian(s) of the above-mentioned minor child, hereby give my/our approval to his/her participation in the program. I/We assume all risks and hazards incidental to such participation: and I/We do hereby waive, release, absolve, indemnify and agree to hold harmless One on One Fundamentals, its organizers, sponsors, supervisors and staff for any claim arising out of an injury to my/our child to the extent covered by accident or liability insurance.

Signature: _____ Date: _____
(Parent/Guardian)

Please enroll my child in the following:

1) 2022 Fall High School Developmental Baseball Clinic (game format) Cost: \$175.00

Sundays - starting September 20th. (Field to be determined)

Dates are: 9/11, 9/18, 9/25, 10/2, 10/23, 10/30, 11/6, 11/13

GAME FORMAT: Game 1 starts @ 12:00 pm , Game 2 - approx 3 hours later.

Games are 9 to 10 innings depending on pitching.

(Depends on how many players register to determine number of teams)

As we do every year, we will continue as long as the weather allows us to. Weather permitting Guarantee 6 games.

Please make checks payable to David Gray.

Registration(s) and payment (s) are due by September 4th.

Please drop off or mail to:

One on One Fundamentals
% David Gray
29 Libby Avenue
Reading, Ma 01867

If you have any questions and/or comments, please contact David Gray at (781) 706-1136 or email
coachgray15@verizon.net