

BASEBALL SOLUTIONS

*required: Team affiliation: _____

*required: Child's Name _____ Birth date _____

*required dad's name: _____ e-mail add: _____

*required mom's name: _____ e-mail add: _____

Medical Waiver and Release of Liability

Whereas _____ (ballplayer) has a desire to participate in various activities and workouts hosted at the Player Development Strategies / Baseball Solutions indoor academies and the undersigned player fully understands the risk involved and that it is possible for participants to sustain serious injury during the course of said exercises and workouts. Now therefore, in consideration of the opportunity to participate in the aforementioned exercise and workouts, I fully covenant not to sue and forever discharge PLAYER DEVELOPMENT STRATEGIES LLC, Baseball Solutions, the Austin Baseball Club, its officers, coaches, managers, trainers, physicians, players, as well as other PLAYER DEVELOPMENT STRATEGIES LLC, Baseball Solutions, the Austin Baseball Club, heirs and next of kin for any and all loss or damage and any claims or demands therefore on account of all injury to the person or property or resulting in the death of the undersigned, whether caused by negligence or otherwise.

I give my consent and approval for the participation of my child in *PDS / Baseball Solutions training* and activities. I certify that my child is physically fit to take part in all activities. I release Player Development Strategies LLC, Baseball Solutions, and the Austin Baseball Club, it's officers, and staff from all responsibility in case of accident or injury. I HAVE READ THE ABOVE WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS

X _____ date _____

\$49 Monthly Individual hitting membership for Take over 100 swings per day - 10 tokens x 12 pitches

Baseball Solutions would like to extend to you the opportunity to purchase a monthly individual hitting membership for \$49 per month. A monthly hitting membership allows you to receive 10 tokens each day you visit the indoor academy Mon-Thurs, 4:30-8:00. Come every day or as your schedule permits. Membership is good from the first of the month to the 31st of the month. Membership is month to month, but, the fee recurs each month until you cancel in writing.

Cancel anytime by sending e-mail to info@baseballsolutions.com

Credit card authorization

I have read and understand the information provided by *Baseball Solutions* regarding my enrollment in the * \$20 monthly individual hitting membership. I authorize *Player Development Strategies, DBA Baseball Solutions* to debit my credit card in the amount of \$ 49 on the 1st of each month until I provide request to terminate in writing to info@baseballsolutions.com. I will read info regarding hitting membership posted on the Baseball Solutions website

VISA

MASTERCARD

AMERICAN EXPRESS

Credit card # _____ exp _____ zip _____