



2009

NATIONAL SPORT ACADEMY  
1729 12<sup>TH</sup> STREET SW  
CALGARY, AB T2T 3N1  
403-777-3646

## Baseball Camp Registration

**TO REGISTER:** Please fill in the required information, including credit card details, and fax to the National Sport Academy at: 403-777-4550.

### PLEASE NOTE

Registration is on a first come, first served basis and is not confirmed until payment has been processed.

### CLINIC CONFIRMATION

**You will receive an e-mail confirmation, once payment has been processed. Your registration is not confirmed until you receive an official confirmation by email.**

### CAMP LOCATION

Absolute Baseball Academy  
2255 Crowchild Trail NW

### CANCELLATION POLICY

1. Registration fees will be refunded (less a \$25 cancellation fee) for cancellations received in writing by October 15th, 2009. Requests must be sent by email to: [info@nationalsportacademy.com](mailto:info@nationalsportacademy.com)
2. Registration fees cannot be transferred to any other camps.
3. No refunds for cancellations will be issued after October 15th, 2009 without a doctor's certificate. Notice must be provided via email to: [info@nationalsportacademy.com](mailto:info@nationalsportacademy.com)

For more information, please call the National Sport Academy at (403) 777-3646

1. PARTICIPANT'S NAME \_\_\_\_\_  
FIRST LAST  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ BIRTHDATE (MM/DD/YR) \_\_\_\_\_  
 MOM: NAME \_\_\_\_\_ BUS. # \_\_\_\_\_ CELL # \_\_\_\_\_  
 DAD: NAME \_\_\_\_\_ BUS. # \_\_\_\_\_ CELL # \_\_\_\_\_  
 TEAM LAST PLAYED \_\_\_\_\_  
 POSITION \_\_\_\_\_  
 SPECIAL MEDICAL CONDITIONS OR ALLERGIES \_\_\_\_\_  
 \_\_\_\_\_  
 EMERGENCY CONTACT NAME & PHONE NUMBER WHILE THE CAMP IS IN PROGRESS \_\_\_\_\_  
 CONFIRMATION EMAIL ADDRESS \_\_\_\_\_

(Confirmation will be emailed once payment has been processed)

2. CREDIT CARD TYPE:  VISA or  MASTERCARD  
 CARD NUMBER \_\_\_\_\_  
 EXP. DATE \_\_\_\_\_ (3 DIGIT CVS CODE ON REVERSE) \_\_\_\_\_

**PLEASE NOTE, CREDIT CARD INFORMATION WILL BE DESTROYED ONCE PAYMENT HAS BEEN PROCESSED.**

### 3. PROGRAM INFORMATION

**This camp is located at the Absolute Baseball Academy Dome and open to athletes from Grades 6-9. Camp Instructors are Coach Reitsma and Coach Lawson. Some baseball experience is required. National Sport Academy reserves the right to remove a registrant from a camp.**

- **NATIONAL SPORT ACADEMY BASEBALL CAMP - \$630.00 (INCLUDING GST)**

**TUESDAY – NOVEMBER 3<sup>RD</sup> 2009 - MARCH 30<sup>TH</sup>, 2010  
 FROM 4:00PM – 5:15PM (EXCLUDING DECEMBER 22<sup>ND</sup>,  
 29<sup>TH</sup> AND JANUARY 5<sup>TH</sup>)**

**TOTAL FEES:** \$ \_\_\_\_\_

4. **FAX THIS FORM TO NATIONAL SPORT ACADEMY AT  
 403-777-4550**