

# Sierra Madre All-Star Camp

Sierra Madre School - Upper Campus  
January 9 -10, 2010

## Registration Form

CAMPER'S NAME \_\_\_\_\_ AGE \_\_\_\_\_ GRADE \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_  
MOTHER/GUARDIAN \_\_\_\_\_ H \_\_\_\_\_ C \_\_\_\_\_  
FATHER/GUARDIAN \_\_\_\_\_ H \_\_\_\_\_ C \_\_\_\_\_  
EMAIL \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

### EMERGENCY INFO:

NAME/RELATIONSHIP \_\_\_\_\_ H \_\_\_\_\_ C \_\_\_\_\_

**CAMP SESSION:** 8-12 yr olds: January 9-10, 9am – 4:00pm  
**Location:** 160 N. Canon Avenue Sierra Madre, CA  
**COST:** \$95 Limited to first 50 campers

Challenge and improve your baseball skills this WINTER at SM Upper campus in Sierra Madre. Participants will be instructed and evaluated by the Sierra Madre All Star Camp coaching staff. Campers will receive a camp t-shirt, personalized instruction and will develop their fundamental baseball skills. Camp will include drills, fun challenges and baseball etiquette. Bring all baseball gear and baseball clothes (glove, hat, bat, helmet).

Make checks payable to: **Sierra Madre All Star Camp**  
Mail check/registration to: **Sierra Madre All Star Camp /ATTN: Ben Olivades**  
28 N. Lima, Sierra Madre CA 91024  
Coach Ben Olivades (626) 355-7214  
[redbird8212@yahoo.com](mailto:redbird8212@yahoo.com)

### ENROLLMENT APPLICATION AND INSURANCE WAIVER

I/we the parents of the above named child hereby release, absolve, indemnify and hold harmless the Sierra Madre All Star Baseball Camp, Ben Olivades and/or his coaching staff for any injuries or damages that he/she may receive or cause as a result from activities during the above mentioned camp. I/we assume all risks and hazards incidental to the conduct of the activities and hereby acknowledge that my child is covered under our personal family health care plan. Camp insured by K & K insurance.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Printed Name/Relationship: \_\_\_\_\_

Insurance Carrier \_\_\_\_\_ Policy # \_\_\_\_\_