

# ProSwing Presents

## Spring Break

**April 18th - April 21st**  
**Monday - Thursday**

**Ages 3 - 6**      10:00 - 12:00 p.m.  
**Ages 7 - 9**      12:00 - 2:00 p.m.  
**Ages 10 - 12**    2:00 - 4:00 p.m.

# CAMP

Check One

Fee - \$195

Ages 3 - 6

Ages 7 - 9

Ages 10 - 12

### Registration

Player Name: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Make Checks Payable to:  
**ProSwing of Port Chester**

Mail to: ProSwing  
Athletic Training Center  
36 Midland Avenue  
Port Chester, NY 10573

**Payment Type:**

Visa     Mastercard     Amex

\_\_\_\_\_ | \_\_\_\_\_  
credit card number    exp. date

#### CONSENT & WAIVER

In consideration of acceptance of my child in the Baseball/Softball Camp outlined above, I hereby for myself, my child, their heirs, executors and administrators waive and release any claim we may have for damages against ProSwing of Port Chester LLC their officials, officers, employees or representatives, or their successors or assigns for any and all injuries, that may be suffered by my child while or as a result of participating in the above said program.

Signature of Parent \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



[www.proswingbaseball.com](http://www.proswingbaseball.com)

Phone - 914-937-6700

Fax - 914-937-2304

