



Orlando Playball

SIGN UP



Name:

Classroom

Birthday:

Parents! Name, Address, Phone Number and Email

Name:

Phone:

Address:

Email:

Release

By signing this form, I waive any and all claims against ORLANDO PLAYBALL, its coaches and the school or staff, and KIDINME CORP., for any illness or injury which may result directly or indirectly from participation in this activity. I give permission to photograph/videotape my child for promotional purposes without any compensation now or in the future. I permit Orlando Playball to provide services for my child on school property.

Payment is due by the first class each month \$15 dollar late fee for payment received after the 15th of the month

Provide 30 day written notice to withdraw your child from Playball

Classes are not prorated due to your child's absence, field trips or school closures

Flat rate tuition regardless of number of weeks in a month

No Playball between Christmas week and January 7th.

Signature

Date:

Tuition Information

Monthly Tuition: \$60 Registration: \$20

Invoicing occurs through a service. You will receive an email after enrollment to complete the process. Please sign below.

Payment Authorization

I authorize Orlando Playball / Koniak Sports LLC to withdraw monthly tuition on the first of each month. I

understand I must give Orlando Playball 30 days written notice to cancel withdraws.

Parent Signature: _____

