## INCINELLI BASEBALL 2025

## **Summer Camp**

July 14-18 (M-F) and July 28 - August 1 (M-F)

Ward Park (WP Babe Ruth) Baseball Fields 9:15 a.m. - 2:30 p.m. 7 - 14 yr olds

Call 407-739-9100

MIncinelli2280@hotmail.com

**Registration Fee: \$380** 

Early registration Fee: \$360 if paid by April 1st. Checks payable to: Incinelli Baseball, LLC, 648 London Road, Winter Park, FL 32792

Join us for a training-intensive camp designed to sharpen baseball skills, but have some fun in the process

APPLICATION:					
Participant's Full Name:					
Age: D.O.B.:					
Last team and level played:  T-shirt size: YM YL AS	ΔΜ	ΔΤ	XL		
Parent/Guardian:	AIVI	AL	AL		
Address:					
Address: City:	ST:	Zip:			
Email:				_	
Primary Phone:					
Emergency Contact:	Relat	Relation:			
Phone:					
☐ July 14–18 ☐ July ☐ Check if you would like lunch provided for day	y 28 – August or an additiona		ssion) - main	dish, side & a c	lrink each
Lunch Fee: + Registration: We are also offering payment via Venmo (@Incinelli	= Fee E	nclosed:	Che 80@hotmail.cor	eck #: n) this year	
I hereby release Incinelli Baseball, LLC from any and all claims and that my child is in good health and is able to participate in all active care.					
Parent/Guardian Signature:  Sorry, but there will be no weather-related refunds.					

## - SUMMER BASEBALL CAMP WAIVER

In consideration of being allowed to participate in any way in the Incinelli Baseball, LLC summer baseball camps, held July 14-18, 2025 and July 28 – August 1, 2025, the undersigned acknowledges, appreciates, and agrees that:

- The risk of injury and/or illness from the activities involved in the program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist;
- 2. The risk to have contact with individuals, who have been exposed to and/or have been diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions, diseases, or maladies does exist, and it is impossible to eliminate the risk that I could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease;
- I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF
  ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others and assume full responsibility for
  my child's participation.
- 4. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
- 5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS INCINELLI BASEBALL, LLC, its officers, coaches, instructors, other participants, and if applicable, owners of the premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
- 6. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, BEFORE ACKNOWLEDGING WITH MY SIGNATURE, I FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY AGREEING TO IT ON MY OWN BEHALF OR ON BEHALF OF THE YOUTH PARTICIPANT ASSOCIATED WITH THESE ORGANAZATIONS, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

ACKNOWLEDGEMENT BY ADULT PARTICIPANT: By acknowledging and agreeing to execute this document below, I agree and verify the following: 1) I consent and agree to assume the risks of participation in these programs; and 2) that I specifically agree to the release as provided herein of all the Releasees, and, for myself, my heirs, assigns and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my involvement or participation in these programs EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

ACKNOWLEDGMENT BY PARENTS AND/OR LEGAL GUARDIANS OF YOUTH PARTICIPANTS: By acknowledging and agreeing to execute this document below, I agree to and verify the following: 1) I am the parent or legal guardian for the youth participant associated with this guardian account, 2) that as parent/legal guardian with legal responsibility for this youth participant, I consent and agree to assume the risks of his/her participation in these programs; and 3) that I specifically agree to his/her release as provided herein of all the Releasees, and, for myself, my heirs, assigns and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to this youth participant's involvement or participation in these programs as provided above EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

Child's Name	Parent's Name	Parent's Signature
 Date		