



Academy • Washington Township

2010 Hit Doctor All Star Softball Camp

Harrison Township at Ella Harris Park

Camp WT - 149 (17 and under)

July 26 – July 30, 2010

- Hitting • Pitching • Bunting • Defensive Play • Camp Awards
- Playing All Positions • Live Game Situations • T-Shirt

Camp Times : 9:00 AM- 1:00 PM

Cost: \$ 160.00

2010 HIT DOCTOR REGISTRATION FORM

Fill out this registration form and send with a \$50 non-refundable deposit to the address listed below, or register by phone or fax with credit card deposit. If you cancel, deposit is transferable. All balances due 1 week prior to camp.

Camp #(s):
WT-149

Player's Full Name: _____ Birthdate: _____ Age: _____

School: _____ Grade: _____

Parent's Name: _____

Home Phone: (____) _____ Work Phone: (____) _____

Mailing Address: _____

City _____ State _____ Zip _____

Parent's Email _____

How did you hear about us? Past Camper Mail Friend Coach Other

PAYMENT INFORMATION

Checks / Money Order should be payable to: HIT DOCTOR WASHINGTON TOWNSHIP

Amount: \$50 deposit only per camp _____ Full Camp Fee (s) _____

Credit Card Payment: _____ - _____ - _____ Expires ____/____ Mo/Yr

VISA/MC ___ AMEX ___ DISC ___

Print Name as it appears on Card: _____

Billing Address (if different from above): _____

By applying to participate in this camp, I agree to hold harmless Hit Doctor Washington Township and their representatives of any and all liability to me or my child attending this camp. My child is physically fit to participate in the camp(s) chosen. I also understand that if my child is unable to attend one of these sessions of a particular camp for any reason, no partial refunds will be made.

Parent's Signature: _____ Date: _____

Submit completed form with payment. If you don't receive confirmation before the camp date, please call to make sure you are registered.

BY MAIL: Hit Doctor Washington Township, 1 Enterprise Court, Sewell, NJ 08080

BY PHONE: 856-218-2322

BY FAX: 856-218-744