

AREA CODE INSTRUCTIONAL BASEBALL CAMP

Delta College • Tuesday, June 30, 2009 8 am to 5 pm | Conducted by Area Code Staff

Come and participate in the Area Code Instructional Baseball Camp

WHAT: Area Code Instructional Baseball Camps

WHEN: Tuesday, June 30, 2009 8:00 am - 5:00 pm

WHERE: Delta College, Stockton, CA

WHAT IS THE COST: The Area Code Instructional Baseball Camp is \$100. In addition to this great opportunity, you will also receive a NIKE Pro shirt to workout in at the Area Code Instructional Baseball Camp and to take home with you.

WHAT ARE THE BENEFITS: The Area Code Instructional Baseball Camps will teach you training skills so that you can go into the season with a proper background. This is a great opportunity to get specialized baseball skills training from the Area Code Baseball Staff, who will help teach you the game. One of the ancillary benefits of participating in this camp, for the players who graduate in '10, '11 and '12, is additional exposure to the scouts who will coach the California prospects at the Area Code Baseball Games in August.

WHAT TO BRING: Bring appropriate workout gear – your own wood bat (bats will be provided but if you have one of your own, you can bring it), baseball pants, warm-ups, baseball cleats, glove, hat and any appropriate equipment specific to your position, i.e. catcher's gear.

WHO ARE THE COACHES: The Area Code Staff are experts in the field of teaching baseball skills.

Space is limited so please fill out the form attached with complete payment information and fax back to 310.791.4809 or mail back to: ESPN RISE, 23954 Madison Street, Torrance, CA 90505 or call with payment information to confirm a spot. Please note: We are limiting space to 25 pitchers due to the camp structure.

We look forward to seeing you at the Area Code Instructional Baseball Camp. Don't miss out!

For more information, please contact Andrew Drennen at ESPN RISE or email him at Andrew.Drennen@studentsports.com or 310-791-1142 x4424





Payment Information - Fax 310-791-4809 or Mail Back

Name:			School	:			
			City	/:			
St: Zip):	Ema	ail Address:				
Home Phone: ()		Yr. of Grad: _		Position:		

Check#:	or	VISA	MASTERCARD	AMEX	(circle one)		
Credit Card No:			Exp. Date:	_ Name o	n Card:		

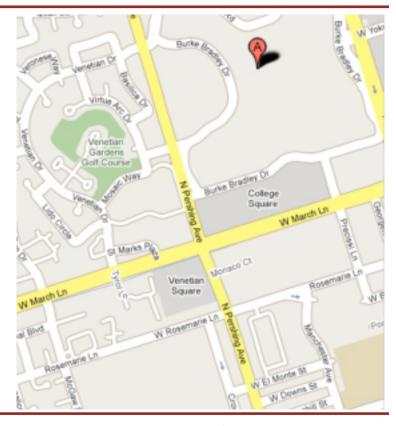
REFUND POLICY: Due to the limited number of spots open at this camp, we can offer this refund policy: If you call by Monday, June 22nd to cancel your reservation we will refund you 50% or \$50.00. After June 23, NO REFUND will be issued regardless of reason.

DIRECTIONS TO DELTA COLLEGE:

5151 Pacific Ave • Stockton, CA 95207

Traveling North OR South

- 1. Take Interstate 5
- 2. EXIT March Lane and Drive East.
- 3. Turn LEFT at PERSHING Avenue
- 4. Field on RIGHT side.





AREA CODE BASEBALL CAMP WAIVER AND RELEASE

ALL PARTICIPANTS MUST EXECUTE THE FOLLOWING WAIVER AND RELEASE OF LIABILITY AND NAME AND LIKENESS RELEASE

Name and Likeness Release

As a condition of my being permitted to compete in Area Code Baseball Camp, and held at Delta College during the period of Tuesday, June 30, 2009 (the "Event"), I hereby grant permission to ESPN Productions, Inc., its parent companies, their successors and assigns (the "Distributors") to utilize my appearance, name, voice and likeness in connection with the Event, publicity for the Event and future editions of the Event and in connection with the promotion of the Event in any and all manner and media throughout the world in perpetuity. I hereby waive any right that I may have to inspect or approve any finished product or any advertising copy that may be used in connection therewith or the use to which it is applied. I hereby warrant that I have the right to make this release and that my granting this release and the rights conveyed thereby will not infringe the rights of any third party. I hereby assign all right, title and interest I may have in any and all media in which any or all of my appearance, name, voice or likeness has been captured in connection with the above to Distributors, along with full rights of assignability.

Physical Condition

I am physically fit to participate in the event(s) in which I have chosen to participate, and have not been advised otherwise by a medical practitioner. **Equipment and Facilities Inspection**

I agree that before I participate in any event, I will inspect the related facilities and equipment. I will immediately advise the supervisor of the event of any unsafe condition that I observe. I will refuse to participate in the event until all unsafe conditions observed by me have been remedied. Assumption of Risk

I understand that I, and each participant in the Event, will be engaging in activities that involve the risk of serious personal injury, illness, permanent disability, dismemberment and death, and that also involve the risk of severe economic and property loss and damage. I understand that these risks may result from the actions, negligence and failure to act of myself and others (including but not limited to other participants in, and the sponsors. organizers and volunteers of the Event) and from the rules of play, the challenges of the event and the condition of any property, facilities or equipment used. I also understand that there may be risks involved which are not known to me or to the Distributors, sponsors, organizers and volunteers, and may not be foreseen or reasonably foreseeable by any of us at this time or at the time of the activities in which I may participate.

I assume all of the foregoing risks including the risk of any negligence by other participants or by the Distributors, organizers, sponsors or volunteers of the Event, the owners, lessors and lessees of the property, facilities and equipment and their respective owners, directors, officers, employees or agents, and the risk of injury caused by the condition of any property, facilities or equipment used during the Event, and accept personal responsibility for any injury (including, but not limited to, personal injury, disability, dismemberment and death), illness, damage, loss, claim, liability or expense, of any kind or nature, that I or my property may suffer arising out of or in connection with the Event or my participation therein or attendance thereat.

Liability Release and Indemnity Agreement

I hereby release and forever discharge and agree to save and hold harmless ESPN Productions, Inc., sponsors, and their respective parents and their subsidiaries and volunteers associated or affiliated with the Event, the owners, lessors and lessees of the property, facilities and equipment used in connection with the Event, the respective organizers, directors, officers, employees and agents of all of them, and the other participants in the Event (each such entity or individual being referred to as a "Released Party") of and from any and all injuries (including personal injury, disability, dismemberment, and death), illness losses, damages, claims, liabilities or expenses of any kind or nature (and whether accruing to me, my heirs or my personal representatives) that are caused or alleged to be caused in whole or in part by the action, negligence, failure to act or condition of the property, facilities or equipment of any Released Party and that arise out of or in connection with the Event or my participation therein or attendance thereat.

Medical Treatment

In connection with any injury I may sustain or illness or other medical conditions I may experience during my participation in or attendance at the Event, I authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by the attending medical personnel if I am not able to act on my own behalf. I further authorize the attending medical personnel to execute on my behalf any permission forms, consents or other appropriate documents relating to medical attention and to act on my behalf if I am not able or immediately available to do so.

Severability of Provisions

I agree that the foregoing agreements are intended to be as broad and inclusive as is permitted by law. Any provisions herein found by a court to be void or unenforceable shall not affect the validity or enforceability of any other provisions.

I HAVE READ AND HAVE UNDERSTOOD THIS RELEASE OF LIABILITY AND NAME AND LIKENESS RELEASE. I UNDERSTAND THAT BY SIGNING THIS RELEASE. I HAVE GIVEN UP SUBSTANTIAL RIGHTS. I HAVE VOLUNTARILY SIGNED THIS RELEASE.

PARTICIPANT Signature:___ ______ Date: ______ _____ Sport: _____ If Participant executing the foregoing release is a minor, the following section must be completed:

I represent that I am a parent or legal guardian of the Participant who has signed the above release, and I hereby agree that we both shall be bound thereby. On behalf of Participant, Participant's parents or guardians, heirs, estate, insurers, assigns and anyone else who may make any claim for or on behalf of Participant, I hereby agree: (1) to all, and will cause Participant to comply with, the above terms; (2) to hold harmless, indemnify and reimburse ESPN RISE, sponsors, the owners, lessors and lessees of the property, facilities and equipment and their corporate affiliates from and for any sums, costs or expenses (including attorney fees) incurred to any person in connection with any loss, damage or injury (including death) arising out of Participant's participation in the Event. I HAVE READ THE RELEASE AND THIS AGREEMENT CAREFULLY, FULLY UNDERSTAND THEIR CONTENT AND VOLUNTARILY AGREE TO THEIR TERMS.

Signature:	Relationship to Minor:	Relationship to Minor:		
Address:		Date:		