



## Sluggers Training Center Sign Up Sheet

### Members Personal Information-

Date: \_\_\_\_\_

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

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

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Members E-mail: \_\_\_\_\_

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

Parent #1 Name: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Parent #2 Name: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Parents E-mail: \_\_\_\_\_

### Emergency Contact Information-

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy#: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Participants Signature: \_\_\_\_\_

Parents Signature: \_\_\_\_\_

Note: Sluggers Training Center LLC requires a photo for all members. This photo is used to authenticate members when entering the building. This is done for the safety of the members and for STC liability reasons. It is confidential information and is not used for marketing, sales or any other purposes by STC LLC. Thank You.