



Complete Performance Baseball Academy

Player Profile Sheet / Statement of Risk

Information	Please enter the information below:
Player Name	
Date of birth (month/date/year)	
Mailing address (# / street / town / state / zip)	
Player Cell #	
Player email address	
Player Twitter handle	
Height	
Weight	
Bats (R/L/S)	
Throws (R/L/S)	
Primary position	
Secondary position	
High School Attending	
Current GPA	
Graduation year	
Father's name	
Father's cell #	
Father's email address	
Mother's name	
Mother's cell #	
Mother's email address	

COMPLETE PERFORMANCE BASEBALL ACADEMY

The following must be completed and signed prior to any participation in any activity.

STATEMENT OF RISK / HOLD HARMLESS AGREEMENT

We (Parents/Guardians of _____) are aware that all athletic activity involves potential for injury. We acknowledge that even with the best coaching, use of good protective equipment and strict observance of rules, injuries are still a possibility and on a rare occasion, these injuries can be so severe as to result in total disability, paralysis, or even death. We acknowledge that we have read and understand this warning. By signing this agreement, I/we agree to release, indemnify, and hold harmless **Complete Performance Baseball Academy**, as well as all **its** employees, agents, representatives, successors, etc. from all losses, claims, theft, demands, liabilities, causes of action, or expenses, known or unknown, arising out of my **participation in, attendance at, any and all personal, group, team training, practices, camps, games, and lessons.**

Parent / Guardian printed name and relation to player: _____

Parent/Guardian Signature: _____

Date _____