

# One on One Baseball Camp/Frozen Ropes

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[www.OneonOneBaseball.com](http://www.OneonOneBaseball.com)

## 2012 Summer Camp Registration Form

Name of Player: \_\_\_\_\_

Name of Parents: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Tel. Day: \_\_\_\_\_ Night: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age at time of Camp: \_\_\_\_\_ E-mail: \_\_\_\_\_

Favorite Positions: 1. \_\_\_\_\_ 2. \_\_\_\_\_

List Medical Conditions/Medications/Inhalers: \_\_\_\_\_

Shirt Size: Child Lg \_\_\_ Child X-Lg \_\_\_ Men Small \_\_\_ Men Med \_\_\_ Men Lg \_\_\_ Men X-Lg \_\_\_

School Attending and Grade (Sept 2012): \_\_\_\_\_

Where did you hear about One on One Baseball? (Website, Friend, Ad,) \_\_\_\_\_

Have you attended any of our Camps in the past? \_\_\_\_\_

Garden City Community Park-\$425.00 Incl. T-Shirt, Prizes, Hot Lunch, Snack & Drink

Hope Field/Juniper Valley Park-Middle Village, Queens-\$335.00 Incl. T-Shirt & Prizes

Ages 6-16 on a first come, first serve basis and only when a deposit is sent in. Please note that in the past all camps have been sold out early.

### Dates

June 25<sup>th</sup> – 29<sup>th</sup> .....at Community Park, Garden City 9 AM-3 PM

July 2<sup>nd</sup> – 6<sup>th</sup> .....at Community Park, Garden City 9AM–3:30 PM (4 days)

July 9<sup>th</sup> – 13<sup>th</sup> ..... at Community Park, Garden City 9 AM-3PM

July 16<sup>th</sup> -20<sup>th</sup> .....at Hope Field/Juniper Valley Park 9AM-3PM

July 23<sup>rd</sup> -27<sup>th</sup> ..... at Hope Field/Juniper Valley Park 9 AM-3PM

Prices.....Hope Field/Community Park

Payment in Full 1 week.....\$335.00/\$425.00 (Deposit \$225.00)

Payment in Full 2 weeks.....\$625.00/\$800.00 (Deposit \$350.00)

Payment in Full 3 weeks.....\$1200.00 (Deposit \$600.00, Garden City Camp only)

Make Checks or Money Orders payable to: One on One One Baseball Inc./Frozen Ropes

And send registration form to:

Dom Scala, One on One Baseball Camp/Frozen Ropes

645 Stewart Avenue Garden City, NY 11530

\*No refunds will be issued 2 weeks prior to start of Camp\*

Please note: Make a copy of this form for your records.

*For credit card & Easy Payment Plan....See Back!*

**One On One Baseball/Frozen Ropes  
Electronic Funds Transfer (EFT)/Payment Plan  
2012 Summer Camps**

Name (Please Print) \_\_\_\_\_

**Payment:**

- Pay in Full
- Easy Payment Plan

Amex       Discover       Visa       Mastercard

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

If you pay in full sign here: \_\_\_\_\_

\_\_\_\_\_  
Name on Card

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

Email Address \_\_\_\_\_

**Signature: I wish to participate in the One on One/Frozen Ropes (EFT) Monthly Payment Plan program. I have completed the above information. I am aware of my responsibilities as a participant of the monthly payment plan using the EFT option. I authorize, One on One/Frozen Ropes to initiate these payments every 30 days after my initial deposit until paid in full. This authority will remain in effect until the last monthly payment plan payment has been processed in June.**

Account Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note: After May 1<sup>st</sup> please call for payment plan. For questions, please call (516) 794-7673.**