



Hornets Baseball

New England A.A.U

Hornets General Agreement

I, _____, accept the offer on behalf of my son, _____ to play for the Hornets Developmental Baseball Program. I understand that being a member of this team is an honor and a privilege and that there is a high level of commitment in being a member of this team.

I also understand that there is a serious financial commitment involved with my son being apart of this program. A general outline of this financial commitment is listed below and I understand that this fee may increase slightly due to unforeseen circumstances. I also understand that this fee does NOT include the cost associated with attending a national tournament. I also understand that this fee does NOT include the costs associated with purchasing my uniform. Finally, I understand that most of these costs are just an estimate and that any money that is overpaid will be returned at the end of the AAU season after all expenses have been paid.

\$1400 Estimated financial commitment includes:

<i>Registration Fee</i>	<i>Umpire Fees</i>	<i>Baseballs</i>	<i>Field Fees</i>
<i>Hitting, Pitching Camps</i>	<i>Membership</i>	<i>Team Workouts</i>	<i>Coaches Fees</i>
<u>National Trip – including airfare, hotel, meal money and car rental NOT included</u>			

I agree to pay the entire fee associated with being a member of this program either prior to workouts beginning in November or according to the payment schedule listed below:

DEPOSIT \$300 Dec 1 -\$300 Feb 1 - \$300 March 1 - \$250 April 1 - \$250

By signing this agreement, I understand that my son and I are committed to this program. I understand that, if I fail to make one of these payments, my son may not be allowed to continue in the program until the amount due is paid. I agree to pay the entire fee associated with being apart of this program. I also understand that all monies paid to the Hornets AAU program on my son's behalf is NON REFUNDABLE under any and all circumstances.

I understand that the goal of the Hornets is to make my son a better baseball player. This will be done mainly through the workouts and practices provided by the Hornets and also through the games that are played. I understand, however, that my agreement for my son to play on this team does not guarantee my son playing time. The coach(es) will have the final say as to the amount of playing time my son may receive.

Finally, I understand and accept the condition that the Hornets coaching staff will not assume any responsibility for accidents and medical expenses incurred as a result in participation in this program. My son is in good health and able to participate in the physical activity of a vigorous program. I hereby authorize the Hornets' Coaching Staff to act for me according to their best judgment in any emergency requiring medical attention.

PARENT/GUARDIAN NAME: _____ PLAYER NAME: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____