



2017 High School Summer Baseball

Monday, June 12 – Saturday, July 15



Location: VCHS Baseball Field

Cost: \$125

Practice Dates: 10am-12pm

Mon 6/12, Wed 6/14, Mon 6/19, Wed 6/21, Mon 6/26, Wed 6/28, Mon 7/3, Wed 7/5, Mon 7/10, Wed 7/12

Game Dates: 10am and 1pm doubleheader on Saturdays

Fri 6/16 (4pm & 7pm doubleheader), Sat 6/24, Sat 7/1, Sat 7/8, Sat 7/15

Coach: Varsity Head Coach Roger Penticoff

Questions?

Coach Penticoff – fastpitch77@verizon.net

To register for high school baseball please submit this form and a check for \$125 (payable to VCHS) by June 12th to the VCHS Office.

Student Name _____ Grade Entering _____

Parent Name _____ Home Phone _____

Cell/Work Phone _____ Email Address _____

AUTHORIZATION TO CONSENT TO TREATMENT OF MINOR

I/we, the undersigned parent(s) of _____, a minor, do hereby authorize Valley Christian High School coaches or school officials as agent(s) for the undersigned consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the Medicine Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable.

This authorization is given pursuant to the provision of Section 6910 of the Civil Code.

Date: _____

Parent/Guardian Signature _____ Name of Insurance Company _____

Any Medical Conditions/Medications _____ Insurance Policy or Group # _____

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Office Use Only: Check Number _____ Check Amount _____