

Fill out this form as completely as possible. Complete the waiver and have it signed by a parent or guardian. Mail the forms and the waiver with a check payable to "**GPBO**" for \$225 to:

DICK SWARTHOUT  
402 NEFF ROAD  
GROSSE POINTE, MI 48230.

## Michigan Baseball Showcase Application

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

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

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

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

Zip Code: \_\_\_\_\_ Area Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of High School: \_\_\_\_\_

Name of High School Coach this coming year: \_\_\_\_\_

Year you will graduate: \_\_\_\_\_ GPA: \_\_\_\_\_

ACT Composite Score: \_\_\_\_\_ SAT Total Score: \_\_\_\_\_

Jersey Size: \_\_Sm \_\_Med \_\_Large \_\_Extra Large \_\_XX-Large

Height: \_\_\_\_feet \_\_\_\_inches

Your most preferred position: \_\_\_\_\_

Your second most preferred position: \_\_\_\_\_

Your third most preferred position: \_\_\_\_\_

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## **PARENTAL WAIVER AND CONSENT FORM**

As the parent or legal guardian of the child named below, I hereby give my full consent and approval for my child to participate as a team member in the sport designated below.

I understand that there are certain risks of injury inherent in the practice and play of this sport, as well as in travel and other related activities incidental to my child’s participation, and I am willing to assume these risks on behalf of my child. I hereby certify that my child is fully capable of participating in the designated sport and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as listed below.

In addition to giving my full consent for my child’s participation, I do hereby waive, release and hold harmless the organization named below, its officers, coaches, sponsors, supervisors, representatives, “releasees” on behalf of myself and my child for any injury that may be suffered by my child in the normal course of participation in the designated sport and the incidental thereto whether the result of negligence or any other causes, and I further agree to hold harmless and indemnify releases for any costs, legal expense or liability they may incur.

_____	_____
<b>(Name of Child)</b>	<b>(Date of Birth)</b>
_____	_____
<b>(Street Address)</b>	<b>(City)</b>
	<b>(State)</b>

**Please list any physical limitations(allergies,hearing, sight,etc.)**

\_\_\_\_\_  
\_\_\_\_\_

<b>(Parent’s Signature)</b>	<b>(Date)</b>
<b>Mich. HS Baseball Showcase</b>	<b>Mich. HS Baseball Showcase</b>
<b>Grosse Pointe Baseball Org.</b>	
<b>(SPONSORING ORGANIZATIONS)</b>	<b>(DESIGNATED SPORT)</b>