



One on One Fundamentals

"Private Baseball Instruction Since 1990"



2026 Fall "BIG DIAMOND" **Developmental Baseball Clinic** **REGISTRATION FORM**

Name: _____ EMAIL: _____

Address: _____ AGE/GRADE: _____

City: _____ State: _____ ZIP CODE: _____

HOME PHONE: () _____

PITCHER YES NO (please circle)

CELL PHONE () _____

CATCHER YES NO (please circle)

PRIMARY POSITION: _____ SHIRT SIZE: _____

OTHER COMMITMENTS: _____

LIABILITY RELEASE FORM

I/We the parent(s)/guardian(s) of the above-mentioned minor child, hereby give my/our approval to his/her participation in the program. I/We assume all risks and hazards incidental to such participation: and I/We do hereby waive, release, absolve, indemnify and agree to hold harmless One on One Fundamentals, its organizers, sponsors, supervisors and staff for any claim arising out of an injury to my/our child(ren) to the extent covered by accident or liability insurance.

Signature: _____ Date: _____

Please enroll my child(ren) in the following:

1) 2026 Saturday "BIG DIAMOND Fall Developmental Clinic (11:00 am to 1:00 pm) COST: **\$200.00**

(Pricing includes: Field User Fees, Shirt, minimum of 6 weeks – weather permitting)

PLACE: Washington Park

Dates: 9/12, 9/19, 9/26, 10/3, 10/17, 10/24, 10/31, 11/7, 11/14, 11/21
(12/5, 12/12, 12/19, weather/field permitting)

FORMAT: Throwing, Fielding, Hitting, Defense, Baserunning,

Please make checks payable to David Gray. You can venmo to coachgray15.

Registration(s) and payment are due by September 7th.

David Gray
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(781) 706-1136, email: coachgray15@verizon.net