

# Triple Play Academy Camp Registration Form

Triple Play Academy  
119 Rhea Lane  
Billings, MT 59102  
(406)969-3969  
www.tripleplayacademy.org

Name of Camper \_\_\_\_\_

Age \_\_\_\_\_

DOB \_\_\_\_\_

Height \_\_\_\_\_

Weight \_\_\_\_\_

Address \_\_\_\_\_

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

Home Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

Email \_\_\_\_\_

Bat R or L

Throw R or L      Position \_\_\_\_\_

Grade \_\_\_\_\_

Parent or Guardian Sign Here \_\_\_\_\_

Date \_\_\_\_\_

Camp Price \_\_\_\_\_ Pd. \_\_\_\_\_

Circle One—Credit Card—Check--Cash