



**2010  
Summerball™/Fall Ball™  
Signup Form**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

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

Camp Type (circle one): Summerball™      Fall Ball™

Payment Method:    Check            Credit Card            Other

Amount: \$ \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Billing ZIP: \_\_\_\_\_ CVV Code (Back of card) \_\_\_\_\_

Name On Card (print): \_\_\_\_\_

I Authorize Hardtke World of Baseball to charge my credit card.

Signature: \_\_\_\_\_

Make check payable to: HWOB  
Mail to: 541 Division St, Bldg B, Campbell, CA 95008  
FAX (408) 866-8088