

REGISTRATION FORM

Participants Name: _____

High School: _____ Class of: 20_____

Birth Date: _____ Age: _____ Grade: _____

Parents Name: _____

Address: _____

City/State/Zip: _____

GPA: _____ Cell: _____ Shirt Size: _____

Email: _____

(email is required and is the primary source of communication)

Please list your primary position(s):

Offense _____

Defense _____

1 Day Combine: February 20, 2012

In consideration of being permitted to participate in exercise, athletic endeavors, or other activities (collectively athletic endeavors") at Sports of All Sorts, the undersigned participant(s) do each agree that Sports of All Sorts, its heirs, assigns, and agents, and any and all other persons or entities involved in its athletic endeavors, together with all subcontractors, employees or volunteers, SHALL NOT BE LIABLE for injury or death to the undersigned participant(s), their heirs, assigns and agents, or for any loss due to theft of or damage to their property or for any other consequential incidental damages caused in any manner whatsoever where any such liability is attributable to the absence of ordinary or even slight care by Sports of All Sorts, in the conduct of athletic endeavors.

Furthermore each of the undersigned DOES HEREBY WAIVE any and all claims or causes of action against Sports of All Sorts which he or she may have by reason thereof AND DOES HEREBY RELEASE AND HOLD HARMLESS Sports of All Sorts from any and all claims or causes of action that he or she may have from the beginning of time, now, and in the future. Each of the undersigned further agrees not to bring or cause to be brought any suit or any such claim or cause of action and acknowledges that the releases and waivers referred to herein shall apply regardless of whether liability is asserted on the basis of contract, strict liability, ordinary negligence or gross negligence.

I also affirm that I am voluntarily participating in athletic endeavors and using the facilities, and further acknowledge that I know, understand, and appreciate the inherent risks of such participation and use (ranging from minor injuries such as sprains, to major injuries such as heart attacks, ankle and knee injuries, to catastrophic injuries such as death or paralysis). I assume full responsibility for any and all injuries or damages from participating in athletic endeavors and facility use, which may occur to me as a result of such participation.

Each of the undersigned further acknowledge that the execution of this Release, Assumption of Risk, and Waiver is continuing in nature, that it is his or her free and voluntary act, that he or she does not intend to participate in athletic endeavors at Sports of All Sorts until or unless he or she has had full opportunity to inspect its exercise and athletic facilities and sites and to receive all information from Sports of All Sorts that might bear on his or her decision to participate, and that he or she is under no duress or undue influence.

I also understand that Sports of All Sorts may compile address labels and lists and may utilize photographs of the named individual(s). I consent to these uses of my name, address and likeness and hereby waive all rights to compensation and litigation for their use in the promotion and/or operation of Sports of All Sorts.

Furthermore, each of the undersigned intends both that he or she be legally bound hereby, and, in the event of his or her death, that this release and waiver shall be binding on his or her estate, heirs, beneficiaries or any other successors in interest.

This Release, Assumption of Risk, and Waiver shall be construed under the laws of the State of Indiana.

SIGNATURE BELOW VERIFIES THAT EACH OF THE UNDERSIGNED HAS READ AND FULLY UNDERSTANDS THE FOREGOING and further certifies that the information provided in his or her entry forms and/or personal data sheets is true and complete.

IN WITNESS WHEREOF, each of the participants sets forth his or her hand at the time and on the date below written.

Parent Signature _____

Date _____

ON-LINE REGISTRATION INSTRUCTIONS

1. Visit our website at www.incredi-plex.com
2. Select "Registration" just above the picture.
3. This will take you to the MySAM login page.

If you are an existing customer:

4. Enter your email and password in the appropriate fields and click the login button.
5. After logging in click 'Register' in the left hand column.
6. Select "Classes, Camps, and Clinics"
7. Select the child you would like to register.
8. Under Season select "President's Day Camps"
9. Select "Register" next to the camp
10. Continue the checkout process and remember to list your preferred offensive and defensive positions in the comments box

If you are a new customer:

4. Under 'New Customer Registration' enter your email address and click 'Sign Up'.
5. On the next page, fill out the required information and click 'Submit'.
6. An email will be sent to you for confirmation.
7. Open email and click link 'Click to Confirm Email Address'
8. The *Registration Successful* page should appear next. This will instruct you to go back to MySam and log-in.
9. Go to Step 5 above.

ALL PRO SPORTS

Best of the Midwest

Football Combine 2012

February 20, 2012



ALL PRO SPORTS

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www.incredi-plex.com



6002 Sunnyside Rd
Indianapolis, IN 46236
317.823.9555
www.incredi-plex.com

Compete and Showcase Your Talent at the Largest Indoor Turf Facility in Indianapolis!

BEST OF THE MIDWEST FOOTBALL COMBINE

*Combine is for students from all school districts, Grades 8 through 12.

SHOWCASE YOUR TALENT

- 40 YARD DASH
- PRO SHUTTLE
- 3 CONE
- BROAD JUMP
- MEDICINE BALL THROW

ALL PRO SPORTS has teamed up with **Incredi-Plex** to provide high school football players with the opportunity to prove themselves, improve their skills, and gain the needed exposure to further their playing careers at the next level. Compete against the Best of the Midwest at our annual football combine! Players will have the opportunity to work with some of the top high school coaching talent in Indiana during this combine.

Bring your cleats, running shoes, and football.



Combine Director, Greg Brookey
317.514.1005
allprocl@comcast.net

ALL PRO SPORTS



COMBINE SCHEDULE

8 am - 9 am: Registration
9 am - 2 pm: Combine Events

Position Work / Drills: 30 minutes
1 on 1 Work: 20 minutes
Group Period:
7-on-7 for Skill Players
OL/DL will have Competition Period



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Indianapolis, IN 46236
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DATE & TIME

February 20, 2012
9 am - 2 pm



TUITION

\$45 per athlete (team rates available)

NAIA, D3, and JUCO college coaches have been invited to attend our event.

Representatives from Scout, 24/7 Sports, and ESPN, Rivals & The Indianapolis Star will be in attendance and adding top performers to their recruiting database.

REGISTER TODAY!

Don't delay - reserve your spot today!

Register online at
www.incredi-plex.com
Or over the phone at
317.823.9555

