Team Florida USA
National Baseball Team

PLAYER CONTRACT

I, Print Players Name _____, hereby commit to Team Florida USA's summer academy team. I will complete all activities that are scheduled and planned. I will act in a responsible manner. I will abide all team rules. I will not participate in anything illegal. I will not do drugs or drink alcohol. I understand that inappropriate behavior on or off the field can result in my dismissal and forfeiture of all fees.

Player Signature _____

PARENT CONTRACT

I, Print Parents Name _____, hereby commit to Team Florida USA's summer academy team. I will make sure that my son completes all activities that are scheduled and planned. I understand that my son and I both have a participation commitment as well as a financial commitment to Team Florida USA. Should we decide to quit for any reason, I understand we will forfeit all fees paid to date.

Parent Signature _____

PAYMENT PLAN

Each family is responsible for establishing a payment plan to pay your player fees. The amount due each month is up to you and your specific situation. Staying in contact with Coach Merchant in the event of changes or adjustments is imperative.

Below is a sample of a plan that will work.

Deposit	**$ 250.00**	**DUE NOW**
Jan 10	250.00	
Feb 10	250.00	
Mar 10	250.00	
Apr 10	250.00	
May 10	250.00	
Total Due	**1500.00**	

Mail Payments
And make Checks Payable To:

Team Florida USA
1612 Deer Avenue
Panama City, FL 32401