



America's
Finest
Academy
is Coming to
Your Area!

**Doyle
Academy**

www.doylebaseball.com/siebert

**BASEBALL
SCHOOL**

**The winning attitude is:
Believing in Yourself!**

**HOSTED BY FVAA
Annual Spring Players' School**

Take the next development step

Reach up for something higher!!
For future seasonal and Summer
Academies visit:

www.doylebaseball.com/siebert

**Topics: Speed and agility, hitting, fielding,
throwing and specialty areas**

About Doyle Academy

Doyle Baseball was founded in 1978 by Denny Doyle and his twin brothers, Brian and Blake. Playing with and against the best, on pennant winners and World Series teams for a combined 30 years professional baseball experience, has helped lay the foundation for Doyle Baseball to develop its unique teaching methods, leading to the game's most innovative and respected training programs.

Dates: Mar 29, 2008
Times: Saturday 12-5 pm
Ages: Groups divided by ages 6-8, 9-10, 11-12, 13-&-Older
Location: Action Park
Tuition: Early Bird - \$45 by Mar 21
Regular Fee – \$65 after Mar 21
deadline March 27, 2008
Special Notes: Bring your own bat & glove.
Bring tennis shoes for indoor use
For More Info. Call: FVAA (919) 552-5465

DOYLE BASEBALL ENROLLMENT APPLICATION

Please print & complete all sections. Use one application per player.

Last Name _____
First Name _____
Street Address _____
City _____ State _____ Zip _____
Home Phone () _____
Birth Date ____ / ____ / ____ Age _____
Parent E-Mail Address _____ (for future updates)
Mother or Guardian Name (first & last) _____
Mother's Occupation _____ Work Phone () _____
Father or Guardian Name (first & last) _____
Father's Occupation _____ Work Phone () _____
How did you hear about Doyle Baseball? _____

Fuquay Varina, NC Mar 29, 2008
Deadline to register March 27th
Early Tuition: \$45 per player
(by Mar 21)
Regular Tuition: \$65 per player
(after Mar 21)
____ T-Shirt - \$15.00 pre-pay
____ Shirt size (Yth med, Yth Lrg, Ad Med, Ad Lrg, Ad XL)
Mail application & payment to:
FVAA
525 N Main St
Fuquay Varina, NC 27526
Make checks payable to:
FVAA

ACCIDENT INSURANCE INFORMATION - MUST BE COMPLETED TO ATTEND THE PROGRAM - All students must provide proof of insurance coverage for any injury or sickness while attending Doyle Baseball. I waive and release Doyle Baseball from any injury or illness incurred going to school from home or while at school or returning from school to home. I hereby give my permission for emergency treatment in the event I cannot be reached.

PAYMENT INFORMATION

____ Check ____ Cash ____ Visa ____ MasterCard
Card Number _____ Exp. _____
Cardholder Name _____
Signature _____

Acceptance of Accident Insurance Disclaimer Above

Name of Insurance Co. _____
Policy Number _____
Parent/Guardian Signature _____
Student Signature _____

