



Lesson Request Form

Please complete the form with your requested lesson times. Please provide us with flexible ranges of days and times. We will make every attempt to make your first choice available for you.

Please note that this is a first come, first serve scheduling system.

Email this form to general@dcbaseballacademy.com with subject line "Lesson Request Form" or leave in the "Schedule Request Bin" at the front desk

| | | | |
|---------------------------|--------|----------------------------|--|
| Player Name: | | Best Contact Phone: | |
| Instructor Name: | | Other Phone: | |
| Email Address: | | Parent Name: | |
| DCBA/BSSA MEMBER?: | YES NO | | |

| Month: | | | | | Entry Date: | | | | |
|--------|------------------|-----------------|------------------|------|-------------|------------------|-----------------|------------------|------|
| Day | Earliest In Time | Latest Out Time | Length of lesson | Type | Day | Earliest In Time | Latest Out Time | Length of lesson | Type |
| 1 | | | | | 17 | | | | |
| 2 | | | | | 18 | | | | |
| 3 | | | | | 19 | | | | |
| 4 | | | | | 20 | | | | |
| 5 | | | | | 21 | | | | |
| 6 | | | | | 22 | | | | |
| 7 | | | | | 23 | | | | |
| 8 | | | | | 24 | | | | |
| 9 | | | | | 25 | | | | |
| 10 | | | | | 26 | | | | |
| 11 | | | | | 27 | | | | |
| 12 | | | | | 28 | | | | |
| 13 | | | | | 29 | | | | |
| 14 | | | | | 30 | | | | |
| 15 | | | | | 31 | | | | |
| 16 | | | | | | | | | |

Types

P = Pitching

H = Hitting

F = Fielding

C = Catching



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TEAM/FACILITY RENTAL REQUEST

| | | | |
|-------------------------|--|---------------------------------|--|
| Name of Team: | | Time Requested: | |
| # of Players: | | Space Requested: | |
| Dates Requested: | | Instruction Requested? : | |