



SWING FOR YOUR SEATS



REGISTRATION FORM

PARTICIPANT NAME: _____

ACCOUNT NUMBER: _____ **ACCOUNT NAME:** _____

YOUR ADDRESS (If different from address on Season Plan Membership account):

PHONE NUMBER: _____ **EMAIL ADDRESS:** _____

DATE OF BIRTH: _____

- I AM THE SEASON PLAN MEMBER AND I WILL BE TAKING THE SWINGS
- I AM BATTING IN PLACE OF THE SEASON TICKET MEMBER AS A "PROXY"

If designating a Proxy, the Season Plan Member of record must fill out and sign the statement below:

PROXY DESIGNATION FORM

I hereby authorize _____ to serve as my Proxy and take my turn at the Baltimore Orioles Swing For Your Seats Event at Oriole Park at Camden Yards on April 14, 2018. I represent that my Proxy is 18 years of age or older, is a legal resident of Maryland, Pennsylvania, Washington D.C., Virginia, or Delaware and will sign a legal document stating that he/she is not a former or current collegiate, professional, or drafted baseball or softball player. I represent that my Proxy is eligible to participate in the Promotion in accordance with the Official Rules for the Promotion. All capitalized terms are set forth in the Official Rules are available at orioles.com/swing.

Season Plan Membership Account Name: _____

Season Plan Membership Account Signature: _____

Today's Date: _____