



## BASEBALL REGISTRATION

### Player Information (please print)

First Name: \_\_\_\_\_ Last: \_\_\_\_\_

DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ +Male +Female Sibling in program? +Y +N

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt: \_\_\_\_\_

Shirt Size: +YS +YM +YL +AS +AM +AL +AXL + \_\_\_\_\_ Y= youth A=adult

Division: +T-ball(3-6y) +Coach Pitch (6-8y) +10u Travel +12u Travel +14u Travel

+10u Softball +12u Softball +14u Softball \*\* NO TEAM REQUESTS

### Parent Guardian Information (Please print)

Mother's First Name: \_\_\_\_\_ Last: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt: \_\_\_\_\_

Email: \_\_\_\_\_ Can you receive text messages? +Y +N

Does player reside with you? +Y +N

Father's First Name: \_\_\_\_\_ Last: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt: \_\_\_\_\_

Email: \_\_\_\_\_ Can you receive text messages? +Y +N

Does player reside with you? +Y +N

### Emergency Contact ; (Please print)

Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt: \_\_\_\_\_

Special Instructions: (siblings name if in the same division or information Recreation Dept. needs to know.)

**Registration Fee Chart -Sorry No Refunds**

<b># of Players</b>	<b><u>Pay Only</u></b>	<b><u>Fundraiser Only</u></b>	<b><u>Fundraiser &amp; Partial Pay</u></b>
1- T-Ball	\$30	10 items	5 items & \$15.00
2-T-Ball	\$50	20 items	10 items & \$25.00
1-T-Ball & 1 Older	\$70	30 items	15 items & \$35.00
1-T-Ball & 2-Older	\$120	50 items	25 items & \$60.00
1-Older	\$50	20 items	10 items & \$25.00
2- Older	\$90	40 items	20 items & \$45.00
3 Older	\$140	60 items	30 items \$ 70.00

I, parent/guardian of \_\_\_\_\_, acknowledge, agree and understand that my child will be involved in a recreational program. I understand that will involve physical activities and the playing of games. Completely understanding that could possibly result in physical injury. I agree to assume, on behalf of my child, all risks of injury incurred or suffered while involved in any activity conducted, sponsored or endorsed by the Carrollton Recreation Department. I agree not to sue the township, it's board members, volunteers or anyone connected with this recreation program for any claim, damage, cost or cause of action which I or my child may have as a result of injuries or damages sustained or incurred while my child is a participant in any such recreation program.

I have read the above agreement, understand them and agree to abide by them. I also agree, acknowledge and understand that there may be pictures of my child or myself posted on the Carrollton Township Recreation Facebook page(s).

I agree to abide by the Carrollton Township Sportsmanlike Conduct Ordinance (Sec.30-160) which if violated, may result in a municipal civil infraction ticket and/or removal from any sporting events sponsored by the Carrollton Township Recreation Department.

Parent/Guardian (Printed Name):\_\_\_\_\_

Parent/Guardian

(Signature):\_\_\_\_\_ Date\_\_\_\_\_