



## BASEBALL REGISTRATION

### Player Information (Please Print)

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

D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Gender:  Male  Female

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

### Division: (Mark only one)

T-ball (4-6y)  Coach Pitch (6-8y)  Travel (10u)  Travel (12u)  Travel (14u)

Girls Softball-Travel (14u)  Girls Softball-Travel (12u)  Girls Softball-Travel (10u)

No team requests will be honored. (Draft determines team placement)

### Shirt Size: (Mark only one)

YS  YM  YL  AS  AM  AL  AXL Y=youth A= Adult

### Parent/Guardian Information

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

Address: \_\_\_\_\_ City \_\_\_\_\_

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

Mothers Email: \_\_\_\_\_

Able to receive text messages?  Yes  No Does the child live with you?  Yes  No

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

Address: \_\_\_\_\_ City \_\_\_\_\_

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

Fathers Email: \_\_\_\_\_

Able to receive text messages?  Yes  No Does the child live with you?  Yes  No

**Emergency Contact: (Someone other than parent or guardian)**

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

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

**FEE CHART - NO REFUNDS**

#Of Players	Fee	Fundraiser Only	Fee & Fundraiser	# of Players	Fee	Fundraiser Only	Fee & Fundraiser
1-T-ball	\$25	10 Items	5 Items & \$15.00	2 Older	\$80	30 Items	20 Items & \$50.00
2-T-ball	\$45	20 Items	10 Items & \$30.00	3 Older	\$125	45 Items	30 Items & \$100.00
3-Tball	\$65	30 items	15 Items & \$45.00	4 Older	\$160	60 Items	40 Items & \$125.00
1-Tball & 1 Older	\$60	25 Items	15 Items & \$45.00	5 Older	\$190	75 Items	50 Items & \$160.00
2-Tball & 1 older	\$85	35 items	20 Items & \$55.00				
2-Tball & 2 Older	\$130	50 Items	30 Items & \$100.00				
1 Older	\$45	15 Items	10 Items & \$25.00				

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): \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (Signature): \_\_\_\_\_