



# South Glens Falls Youth Baseball

## Player Registration Form

Your child's

age on

April 30th

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### Player Information:

Name		Birthday (mm/dd/yy)	School Child is Attending	
Address		Gender Boy      Girl	Circle Uniform Size  Youth Small    Adult Small  Youth Med.      Adult Med.  Youth Large     Adult Large	
Town/Village				
Home Phone	Cell Phone			
email address				
Please describe any physical limitations (allergies, hearing, sight, etc.)				

### Primary Contact:

Name	
Address	
Town/Village	
Home Phone	Cell Phone
email address	

### Secondary Contact:

Name	
Address	
Town/Village	
Home Phone	Cell Phone
email address	

### Emergency/Medical:

Emergency Contact	Home Phone
Relationship to Child	Cell Phone
Medical Insurance Provider	
I.D. or Policy No.	

### Registration Fees:

Check box if fees were collected on a sibling's form:

Base registration fee (\$40):  
(\$75 for Babe Ruth)      \$ \_\_\_\_\_

Additional sibling(s) registration:  
(\$30 per sibling, \$100 max fee)      \$ \_\_\_\_\_

Payment in lieu of candy fundraiser:  
(\$25 per player)      \$ \_\_\_\_\_

### Total Collected:

\$ 

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Cash \_\_\_\_\_ Check No. \_\_\_\_\_

No. of candy boxes received: \_\_\_\_\_

Write sibling's name in box if fees were collected on their form

### Agreement/Disclaimer:

I/We, the parents (or guardians) of the above-named candidate for SGF Youth Baseball, hereby give my/our approval to participate in any and all baseball activities, including transportation to and from the activities, and in addition:

- I/We agree to abide by the rules of the Code of Conduct.
- I/We know that participation in baseball may result in serious injury and that protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify and hold harmless SGF Youth Baseball and its organizers, sponsors, supervisors, board members and officers from all legal responsibilities.
- I/We, upon request, may be required to furnish a certificate of birth and/or proof of legal residence.
- I/We understand that the registration fee is non-refundable.

\_\_\_\_\_ Fees received by: (SGFYB Rep.)      Date

\_\_\_\_\_ Signature of Parent or Guardian      Date