

2012 BOYS BASEBALL REGISTRATION FORM (AGES 7-17)

Please return completed form and fee to your school no later than
Wednesday, March 14th.

**LATE REGISTRANTS ARE NOT GUARANTEED DUE TO NECESSARY
ORDERS THAT NEED TO BE COMPLETED.
PLEASE BE PROMPT TO ENSURE PARTICIPATION.**

All registrants should plan to attend the Spring Day Camp at the PCHS on March 25.
Detailed information on the back of this form.



MAKE CHECKS PAYABLE TO "PC YOUTH BASEBALL/SOFTBALL"

PLEASE MARK APPROPRIATE BOX:

√	AGES/LEAGUES	FEE	LEAGUE
	BOYS INSTRUCTIONAL (AGES 7-8 OR 8U) – COACH PITCH	\$40.00	PC HOUSE
	BOYS ATOM LEAGUE (AGES 9-10 OR 10U) – KID PITCH	\$40.00	PC HOUSE
	BOYS MINOR (AGES 11-12 OR 12U) TRAVEL LEAGUE	\$75.00	LAKESHORE SUMMER
	BOYS JUNIOR PONY (AGES 13-14 OR 14U) TRAVEL LEAGUE	\$75.00	GRAYTOWN LEAGUE

(SEASONS ARE MAY-JULY) (PRESEASON PRACTICES DETERMINED BY COACH)

AGES OF THE PLAYER ARE AS OF APRIL 30, 2012

PLAYERS AGE: _____

CHILD'S NAME: _____

BIRTH DATE: _____

ADDRESS: _____

CELL PHONE: _____

SCHOOL: _____ CURRENT GRADE: _____

HOME PHONE: _____

E-MAIL ADDRESS: _____

WORK PHONE: _____

PREFERRED DOCTOR: _____

DR. PHONE #: _____

SPECIAL MEDICAL NEEDS: _____

COACH OF LAST YEAR'S TEAM: _____

CHECK APPROPRIATE SHIRT SIZE

<input type="checkbox"/> YT. SMALL (6-8)	<input type="checkbox"/> YT. MEDIUM (10-12)	<input type="checkbox"/> YT. LARGE (14-16)	<input type="checkbox"/> ADULT SMALL
<input type="checkbox"/> ADULT MEDIUM	<input type="checkbox"/> ADULT LARGE	<input type="checkbox"/> ADULT X-LARGE	<input type="checkbox"/> OTHER: _____

WAIVER BELOW MUST BE SIGNED

Your signature below indicates that to your knowledge the information given on this form is correct and that you have read and agree with the following waiver: In consideration for my child listed above being allowed to participate in the leagues checked above, I hereby waive all claims for injury or accident or liability of any kind and do hereby release Port Clinton City Schools, the City of Port Clinton and its Parks & Recreation Dept, and Port Clinton Youth Baseball, their employees, all managers, chaperons, sponsors, directors, officials or owners of the property on which the facility is located, from any claims, now or in the future, for such injury or accident. I likewise release from responsibility any person transporting my child to or from league activities. Also, I will furnish, if requested, a copy of the birth certificate of my child.

PARENT/GUARDIAN SIGNATURE: _____ DATE: ___/___/___

PRINT NAME: _____

PLEASE CHECK BOX IF YOU ARE WILLING TO ASSIST WITH ANY OF THE FOLLOWING:

<input type="checkbox"/> UMPIRE	<input type="checkbox"/> COACH	<input type="checkbox"/> ASST. COACH	<input type="checkbox"/> TEAM SPONSOR	<input type="checkbox"/> CONCESSIONS
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PAID \$ _____ CASH _____ CK# _____ DATE REC. ___/___/___