

Bloomfield Rotary Youth Baseball

2013 Registration Form

*A spot in the league is only guaranteed with paid registrations

Player's Name:	Age on 4/30/13:	Birthdate:
Address:	Parent/ Guardian:	
City:	Zip:	School: Current Grade:
Phone Number:	E-Mail Address:	
Special Information or Requests: (Please note that requests are made when possible, but not guaranteed)		

PARENT'S PERMISSION

*I/We, the parent(s) or legal guardian(s) of the above named candidate for a position in the Bloomfield Rotary Youth Baseball, hereby give my/our permission to participate in any and all league activities, including transportation to and from activities.

*I/We know that participation in t-ball or baseball activities may result in serious injuries or death and protective equipment does not prevent all injuries to players and do hereby waive, release, absolve, and agree to hold harmless the Bloomfield Rotary Youth Baseball, other league affiliations, the organizers, sponsors, supervisors, managers, coaches, participants, and persons transporting my child to and from activities for any and all claims arising out of any injury to my/our child whether the result of negligence or for any other cause.

*I/We agree to return upon request the equipment issued to us and my/our child in as good condition as when it was received, except for normal wear and tear.

Parent or Guardian's Signature: _____ Date: _____

Parent or Guardian's Printed Name: _____

Age Requirements: please see below	VOLUNTEER INFORMATION																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Division</th> <th style="width: 25%;">Birthdate</th> <th style="width: 15%;">Age</th> <th style="width: 45%;">Cost</th> </tr> <tr> <td>T-Ball</td> <td>5/1/06 to 4/30/08</td> <td>5 & 6</td> <td>\$25</td> </tr> <tr> <td>Rookie</td> <td>5/1/04 to 4/30/06</td> <td>7 & 8</td> <td>\$30</td> </tr> <tr> <td>Minor</td> <td>5/1/02 to 4/30/04</td> <td>9 & 10</td> <td>\$30</td> </tr> <tr> <td>Major</td> <td>5/1/00 to 4/30/02</td> <td>11 & 12</td> <td>\$40</td> </tr> </table>	Division	Birthdate	Age	Cost	T-Ball	5/1/06 to 4/30/08	5 & 6	\$25	Rookie	5/1/04 to 4/30/06	7 & 8	\$30	Minor	5/1/02 to 4/30/04	9 & 10	\$30	Major	5/1/00 to 4/30/02	11 & 12	\$40	<p> <input type="checkbox"/> Coach <input type="checkbox"/> Assistant Coach <input type="checkbox"/> Concession Stand/Fundraisers </p> <p>Birth Certificate: (Our league will keep a copy on file for each player) **Please enclose a copy</p>
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T-Ball	5/1/06 to 4/30/08	5 & 6	\$25																		
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<p>\$10 Sibling Discount (\$10 will be taken off the registration cost for each additional sibling registered) \$ - _____</p>	<p>If mailing in registration form, mail to: Bloomfield Rotary Youth Baseball c/o Kate Rogers, Treasurer 6786 Wheeler Road, Bloomfield, NY 14469</p>																				
<p>TOTAL REGISTRATION COSTS \$ _____</p>																					

Office Use Only:

Registration Amount Paid: Cash _____ Check _____ (#: _____) Received By: _____ Date: _____ Fundraiser Tickets: Received _____	Birth Certificate: Yes ___ Needed ___ Parent Signature: Yes ___ Needed ___ Medical Release Form: Yes ___ Needed ___ Code of Conduct Form: Yes ___ Needed ___
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