

MADISON-RIDGELAND YOUTH CLUB 2012 SPRING BASEBALL REGISTRATION Ages 4 -18

Cash _____/Check # _____
Received by _____

Make checks payable to MRYC Baseball

REGISTRATION FEE (Dec 1, 2011 – Feb 10, 2012)

Non Madison County Residents add \$15.00

Ages 4 - 6 -----\$ 75.00

Ages 7– 18 -----\$ 80.00

LATE REGISTRATION FEE

Non Madison County Resident add \$15.00

After Feb 10th – Ages 7 – 18 -----\$130

Player's Name Date of Birth

Father's Name Mother's Name

Street Address City Zip

Home Phone Father's Cell Mother's Cell

Father's Email Mother's Email

Emergency Contact Phone

On April 30, 2012 my Child will be Years old. Has your Child ever played organized baseball before this year:

By checking this box you are asking for your child o play up one age group and acknowldge that he / she meets the standard stated below.*

***(In order to qualify for this option, player must have been born between May 1st and July 31st of 1999 or a previous year.**

Please choose a Player's Jersey Size

- Youth X-Small (Ages 4-6 Only)
- Youth Small
- Youth Medium
- Youth Large
- Adult Small
- Adult Medium
- Adult Large
- Adult X-Large
- Adult XX-Large

Would you like to Head Coach?

If so, with whom

Would you like to Asst. Coach?

If so, with whom

Would you Sponsor a team?

*****Please note—if you order the incorrect shirt size and wish to receive a different size; you will be responsible for the cost of the new shirt**

THE FOLLOWING MUST BE READ AND SIGNED FOR REGISTRATION TO BE VALID:

I/We, the parent(s) or legal guardian(s) of the above-named candidate for a position on a baseball team, hereby represent that such child is in good health and can participate in competitive baseball. I/We do further give my/our permission for such child to receive emergency medical and surgical treatment procedures of any kind and nature, which may be deemed advisable by any physician who may attend or treat such child at or during all baseball related activities, including going to or coming from baseball practice, activities or games. I/We hereby absolutely assume all risks and hazards incidental to such participation and release, absolve and full forgive and further agree to indemnify and hold harmless the Cities of Ridgeland, Madison and the Madison-Ridgeland Youth Club, and all persons and entities associated with the Cities of Ridgeland, Madison and the Madison-Ridgeland Youth Club including persons transporting my/our child to or from activities, from any and every claim, demand, action or right of action, of whatever kind or nature, either in law or in equity arising from or by reason of any injury known or unknown or death to my/our child or property damage whether the result of negligence or any other cause.

THIS AGREEMENT IS GIVEN IN CONSIDERATION FOR MY/OUR CHILD'S BEING ALLOWED TO PARTICIPATE IN THE AFORESAID ACTIVITIES.

Signature of Parent or Guardian _____ Date _____

Please identify any physical or medical disability your child may have including allergies.

Please list any siblings of the same age.