

\*\*\*\*\* **PLAYER REGISTRATION FORM** \*\*\*\*\*

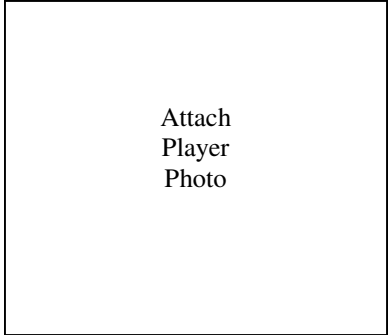
Player's Name \_\_\_\_\_ Date \_\_\_\_\_

DOB \_\_\_\_\_ Age \_\_\_\_\_ (as of 8/1)

Address \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_



|                                      |                                     |
|--------------------------------------|-------------------------------------|
| Shirt Size<br><b>Youth:</b> XS S M L | Pant Size<br><b>Youth:</b> XS S M L |
|--------------------------------------|-------------------------------------|

|   |  |
|---|--|
| Shirt Size<br><b>Adult:</b> S M L XL 2X | Pant Size<br><b>Adult:</b> S M L XL 2X |
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| Pant Size<br><b>Adult:</b> S M L XL 2X |
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*Please choose sizes carefully, if unsure of the size, ask a Board Member to use the size chart (additional \$2.00 for 2X and above)*

\*\*\*\*\* **PARENTS INFORMATION** \*\*\*\*\*

Parent/Guardian \_\_\_\_\_ Home # (\_\_\_\_) \_\_\_\_\_

\*\*\*\*\* **EMERGENCY CONTACT INFORMATION** \*\*\*\*\*

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

Did you play with Tri-League last year? Y / N \_\_\_\_\_ If yes, you will remain on the same team unless you age out.

\*\*\*\*\* **SIBLING POLICY** \*\*\*\*\*

If you have any **BROTHERS** or **SISTERS** that will be playing in the same division, they will be placed on the same team unless you request otherwise.

\*\*\*\*\* **MEDICAL INFORMATION** \*\*\*\*\*

My child has the following handicaps: \_\_\_\_\_

**WAIVER**

I do hereby consent to let my son/daughter participate in the activities conducted by the W.130th St. Tri-League, Inc.

I understand the risks associated with the sport of baseball and based on that knowledge, I voluntarily and knowingly assume all risk and danger of personal injury and all other hazards arising from or related in any way to the above described activities.

I agree not to hold the City of Cleveland, the Sponsors, or any person connected with this organization in any capacity liable for any claims arising from any injuries sustained by the above named participant during the course of the program.

I agree to abide by the laws and rules of play established by the duly elected officers and duly appointed officials of any league event my child or myself participates in as a member of this league.

I understand that the W.130th St. Tri-League, Inc. DOES NOT provide insurance coverage for my child or myself. I further understand and agree that any injuries sustained by my child or myself while attending or participating in any league-sponsored activity will be financially my responsibility

I agree to accept full responsibility for any debt incurred by my child or myself in relationship to league registration and activity fees. Any debt incurred will be paid in full. The league reserves the right to hold back uniforms and/or trophies and even ban myself or my child from any activity until said debt is paid in full.

**PLAYER/PARENT SIGNATURE X** \_\_\_\_\_ **DATE** \_\_\_\_\_