

**Wakulla Cal Ripken League/
Wakulla County Parks and Recreation
BASEBALL SPRING 2010 REGISTRATION FORM
Baseball Registration Fee--All Divisions--\$85**

For League Use Only: Check Number: _____
Cash: _____ Amount: _____
Minor/Major Manager _____
Age Verified: Yes _____ No _____
Player Card Issued (Date): _____

SECTION 1 – GENERAL INFORMATION:

(Make checks out to Wakulla Cal Ripken League)

Player's Last Name _____ First Name _____ Date of Birth _____ Gender _____
Father's Name _____ Mother's Name _____ E-Mail _____
Address _____ City _____ Zip Code _____
Home Phone # _____ Work Phone # _____ Cell Phone # _____
Baseball Shirt Size: (circle) **Youth** XS S M L **Adult** S M L XL XXL
Pant Size: (circle) **Youth** XS S M L **Adult** S M L XL XXL
Cap Size (circle) **Youth** XS S M L **Adult** S M L XL XXL

SECTION 2 – EMERGENCY CONTACT INFORMATION:

Who should we contact in an emergency?

Name _____ **HomePhone** _____ **Work** _____ **Cell** _____
Allergies (Medication): _____ Immunizations current? YES/NO
Father/Mother/Guardian Signature _____ Date _____

Insurance: THIS IS OPTIONAL. Please check one of the following:

____ **I DO** want my child covered by the special accident insurance policy at a cost of \$7.50 per player.

____ **I DO NOT** want my child covered by this policy.

My policy is: INSURANCE COMPANY NAME _____ INSURANCE POLICY NUMBER _____

SECTION 3 – SPECIAL REQUESTS INCLUDING PLAYING OUTSIDE OF AGE APPROPRIATE DIVISION:

Due to our draft policy, we can not guarantee any requests. All requests are subject to board approval:

I/We understand that for our child to be considered for play in a division other than his/her appropriate division, he/she must attend skill assessments in both divisions and may not be drafted into the division requested. **Initials:** _____

SECTION 4 – VOLUNTEER/SPONSORSHIP INFORMATION:

Would you/your company be interested in becoming a League Sponsor? YES /NO

Contact Name _____ Phone # _____

Would you be willing and interested in serving on a League Committee? YES/NO

Contact Name _____ Phone # _____

SECTION 5 – TERMS AGREEMENT:

I/We, the parent, or guardian(s) of the above named registrant for Wakulla Cal Ripken League, hereby give my/our approval to participate in any or all Cal Ripken League activities. I/We assume all risk and hazards incidental to such participants including transportation to and from these activities; and I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the local Wakulla Cal Ripken League, Babe Ruth Baseball, Inc., Wakulla County Parks & Rec. Dept., Wakulla County Board of County Commissioners, the organizers, sponsors, supervisors, participants, spectators, and persons transporting my/our child to and from activities, for any claim arising out of an injury to my/our child, whether the result of negligence or for any other cause, except to the extent and in the amount of covered by the League accident or liability insurance. I/We agree that any and all information on this registration form may be used by Wakulla Cal Ripken League on their internet website for administrative purposes. **I/We agree there will be NO REFUNDS under any circumstances after uniforms have been ordered for the registrant.** Any refund will be subject to a \$10.00 administration fee. Return check fee is \$25.00.

SECTION 6 – CODE OF CONDUCT:

I hereby pledge to provide positive support, care, and encouragement for my child by following this Parents' Code of Ethics. (1) I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice or other youth sports event. (2) I will place the emotional and physical well being of my child ahead of a personal desire to win. (3) I will insist that my child play in a safe and healthy environment. (4) I will support coaches and officials working with my child in order to encourage a positive and enjoyable experience for all. (5) I will demand a sports environment for my child that is free of tobacco, drugs, and alcohol, and will refrain from their use at all youth sports events. (6) I will remember that the game is for youth – not for adults (7) I will do my very best to make youth sports fun for my child. (8) I will ask my child to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed, or ability. **Initials:** _____

Parent or Guardian SIGNATURE _____ **DATE** _____

Please print your name here: _____