

SPENCERPORT JUNIOR BASEBALL

SJBI Use Only

2010 REGISTRATION FORM

(please *print* and use one form per player)

Applicant's Name _____ Boy _____ Girl _____

Address _____ Zip Code _____ Phone _____

Birthdate (Month, Day, Year) _____ Age (on April 30, 2010) _____ League _____

Parent/Guardian First & Last Name _____

E-Mail Address (**PRINT CLEARLY**) _____

SPECIAL REQUESTS:

PLEASE CIRCLE ONE SHIRT SIZE AND ONE PANTS SIZE

SHIRT	YS	YM	YL	AS	AM	AL	AXL
OPTIONAL PANTS	YS	YM	YL	AS	AM	AL	AXL

Can you help in 2010? It is requested that each family volunteers for at least one activity:

_____ Managing (Shirt Size) _____	_____ Open Board Positions
_____ Coaching (Shirt Size) _____	_____ End of Season Awards Picnic
_____ Umpiring (Shirt Size) _____	

I, the parent/guardian of the above named, request that my child participate in all Spencerport Junior Baseball activities. I assume all risks and hazards incidental to such participation, including transportation to and from activities and do hereby waive, release, absolve, indemnify and agree to hold harmless the the Program, its organizers, sponsors, participants and persons for any claim arising out of any injury to my child, except to the extent and in the amount covered by accident or liability insurance. If I am not present in the event of any injury to my child, I request that my child's manager/coach or designee call for aid/assistance. **I, the parent/guardian of the above named, also agree to abide by the Parent Code of Conduct that has been provided to me. I understand that violations by myself or family members of the Code of Conduct can result in possible penalties.**

PARENT/GUARDIAN SIGNATURE _____

DATE _____ AMOUNT ENCLOSED _____ CHECK NUMBER _____

Checks are made payable to **Spencerport Junior Baseball**.

*****There is a \$10.00 per check fee for checks returned for insufficient funds.*****

MAIL-IN REGISTRATIONS RECEIVED AFTER JANUARY 31, 2010 ARE SUBJECT TO A \$10 PER PLAYER LATE FEE