

REYNOLDS YOUTH BASEBALL PLAYER REGISTRATION FORM

Player name: _____ Birth date: _____
Current grade in school: _____ Currently attending school at: _____
Shirt size: _____ Hat size: _____ Parent email address(es): _____

Copy of Report Card is required for proving player's grade and attendance in Reynolds School District (RSD) (you may black out the academic grades); if player attends school outside of RSD, proof of residency in RSD is required in addition to the report card showing what grade the player is in.

Home Address: _____ City: _____ Zip: _____ Home Phone: _____

Parent/Guardian Information

Mother's Name: _____ Father's Name: _____
Home Phone: _____ Cell: _____ Home Phone: _____ Cell: _____

IN CASE OF EMERGENCY INVOLVING YOUR PLAYER, IN YOUR ABSENCE, CONTACT:

Name: _____ Relation: _____ Phone #: _____ / _____
Name: _____ Relation: _____ Phone #: _____ / _____

List an medical conditions or physical/mental limitations player may have: _____

Parent's/Guardian's Permission to Participate

I give permission for my child, _____ ("the Player"), to participate in all Reynolds Youth Baseball (RYB) activities for the 2018 season. I recognize the possibility of physical injury associated with participating in such activities, and hereby waive all rights and claims to damages that the Player may sustain in connection with, or because of, participation in league activities. I also give permission for emergency medical treatment of injury the Player may sustain while participating in any RYB activity. I understand that this is for the purpose of assuring prompt treatment by duly licensed medical personnel to preserve the life or well being of the Player. I also understand that RYB's insurance is secondary to my own insurance.

Parent or Guardian Signature: _____ Date: _____

Your Payment/Volunteer Info/Permission to Post Photos

Without proper payment, players are not assigned to a team. There is a \$20 returned check fee. **NOTE: All players are expected to participate in team fundraisers.**

Volunteering for RYB is optional, but all volunteers must submit and pass a background check and take concussion training. If you will participate as a volunteer you must complete a volunteer application, pay the \$10 background check fee, and complete the online concussion training course.

Player registration fee (\$200) + Volunteer Fee _____ = \$ _____ **TOTAL (can be made in 2 payments - 1st at registration, second by February 15)**

I grant permission for photos/images that the Player without any other personal identifiers to be published on RYB's website or Facebook page. Parent of Guardian Signature: _____ Date: _____