

2020 CHURCH POINT RECREATION

Baseball/Softball Registration Form

REGISTRATION DEADLINE IS MARCH 6th 2020

Registration Fee is \$50.00

(For Office Use Only)

Amount Paid- _____ Ck#/Cash _____

Received By- _____ Date- _____

PLEASE CHECK WHERE YOU CAN HELP-
HEAD COACH () ASST. COACH () TEAM MOM ()

Last Name: _____ First Name: _____

Address: _____ City: _____ Zip Code: _____

Birth Date: _____ Age: _____ M/F: _____ Last League Played In: _____

Uniform Size (Circle One)

Youth -

S (6-8)

M(10-12)

L(14-16)

Adult

S

M

L

XL

Mother's Name: _____ Phone Number: _____

Father's Name: _____ Phone Number: _____

Emergency Contact: _____ Phone Number: _____

In case of emergency and in the event, that we are unable to contact the person's name above, please sign below granting permission to provide or secure medical help for the player named above

Parent/Guardians Signature: _____ Date: _____

Athletic Program Participants Release

I/We the undersigned, do hereby waiver, release, and forever discharge any and all claims against the town of Church Point, the Church Point baseball/softball league program, its Park Director, coaches, volunteers or agents for damage and/or injuries to the undersigned which may arise from the participation in the Church Point baseball/softball league athletic programs.

Player Name: _____

Parent/Guardian Signature: _____

Date: _____

A COMPLETED REGISTRATION FORM WITH A BIRTH CERTIFICATE COPY ARE MANDATORY. FORMS NEED TO BE TURNED IN TO CHURCH POINT CITY HALL MONDAY – FRIDAY BETWEEN THE HOURS OF 8 AM – 4 PM.