



Player/Child Information			
Name:	Birthday (dd/mm/yyyy):	Age:	Gender:
Address:		Town:	Postal Code:
T-Shirt Size: Please note that YOUTH sizing is used.			
XS	S	M	L XL

Parent/Guardian Contact Information			
<b>Parent/Guardian 1</b>		<b>Parent/Guardian 2</b>	
Name:		Name:	
Work Phone:	Cell Phone:	Work Phone:	Cell Phone:
Email:		Email:	
Address (if different from player):		Address (if different from player):	

Are either parent contacts interested in coaching?	Parent 1	Parent 2
Coaches receive free child registration OR 1 free child 10 pass to Recreation Centre per age group coached.		

Emergency Contact Information			
Name (other than parent):		Home Phone:	Cell Phone:
Name (other than parent):		Home Phone:	Cell Phone:

Age Group Categories (subject to change based on registration and field availability)			
Please note baseball will run from May 30th to July 8th, 2022.			
Check 1	Birth year	Ages	Days of the Week
<input type="checkbox"/>	2016 - 2017	5 to 6	Wednesday
<input type="checkbox"/>	2014 - 2015	7 to 8	Tuesday
<input type="checkbox"/>	2012 - 2013	9 to 10	Monday
<input type="checkbox"/>	2009 - 2011	11 to 13	Thursday

Fees					
Age Group		5 to 6	7 to 8	9 to 10	11 to 13
Regular Registration (April 22 - May 13)		\$ 50.00	\$ 50.00	\$ 50.00	\$ 50.00



**Youth Program Release, Waiver, and Assumption of Risk**

I, the undersigned hereby acknowledge and agree that in consideration of being permitted to participate in activities organized, operated, or sanctioned by the Recreation and Culture Department, herein called "The Association"

1. I do hereby release The Association, its members, officers, directors, employees, independent contractors and agents from all liability, and do hereby waive as against The Association, its members, officers, directors, employees, independent contractors and agents all resources, claim cause of action of any kind whatsoever, in respect of all personal injuries or property losses which I may suffer arising out of or connected with, my preparation for, or participation in, the aforesaid program, notwithstanding that such injuries or losses may have been caused solely or partly by the negligence of The Association or any of its members, officers, directors, employees, independent contractors, or agents.
2. And I do hereby acknowledge and agree:  
That activities can be dangerous, exposing participants to many risks and hazards, some of which are inherent in the very nature of the activity itself, others which result from human error and negligence on the part of the person involved in the preparation and staging the aforementioned programs, classes and other activities.
3. I understand and permit pictures of my child to be taken during the League and used for promotional purposes for the Recreation Centre.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Department Use:**

Payment Method:

Cash

Cheque

Debit

Credit

Coaching- FREE Registration

Receipt Number: \_\_\_\_\_