



# 2016 SANDWICH T-BALL ASSOCIATION PLAYER REGISTRATION FORM

PLAYER INFORMATION					
PLAYER NAME					
BIRTHDATE		GENDER	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE	
ADDRESS					
ADDRESS 2					
CITY		STATE		ZIP	
RETURNING PLAYER	<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, TEAM NAME		
2016 DIVISION	<input type="checkbox"/> T-BALL	<input type="checkbox"/> SUPER T-BALL			
SHIRT SIZE	<input type="checkbox"/> SMALL (6-8)	<input type="checkbox"/> MEDIUM (10-12)	<input type="checkbox"/> LARGE (14-16)		

PARENT/ GUARDIAN 1 INFORMATION						
NAME						
PHONE/HOME		PHONE/CELL				
EMAIL						
RELATIONSHIP						
I WILL VOLUNTEER FOR	<input type="checkbox"/> COACH	<input type="checkbox"/> ASSISTANT COACH	<input type="checkbox"/> FIELD DAY	<input type="checkbox"/> CONCESSION STAND	<input type="checkbox"/> BOARD MEMBER	<input type="checkbox"/> OTHER(PLEASE LIST):

PARENT/ GUARDIAN 2 INFORMATION						
NAME						
PHONE/HOME		PHONE/CELL				
EMAIL						
RELATIONSHIP						
I WILL VOLUNTEER FOR	<input type="checkbox"/> COACH	<input type="checkbox"/> ASSISTANT COACH	<input type="checkbox"/> FIELD DAY	<input type="checkbox"/> CONCESSION STAND	<input type="checkbox"/> BOARD MEMBER	<input type="checkbox"/> OTHER(PLEASE LIST):

If parent(s)/legal guardian cannot be reached in case of emergency, contact:			
NAME			
PHONE		RELATIONSHIP	
NAME			
PHONE		RELATIONSHIP	



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## WAIVER AND RELEASE BY PARTICIPANTS / PARENTS

I HEREBY GIVE PERMISSION FOR MY CHILD TO PLAY T-Ball in the Sandwich T-Ball Association program for the 2016 season. As a participant of this program I recognize and acknowledge there are certain risks of physical injury and I agree to assume full responsibility of any injury, including death, damages and loss that the participant may sustain as a result of participating in any and all activities connected or associated with this program. I agree to waive and relinquish all claims I may have as a result of participating in the program against the Sandwich T-Ball Association, its officers and agents. I HAVE READ AND FULLY UNDERSTAND THE ABOVE PROGRAM DETAILS AND WAIVER AND RELEASE OF ALL CLAIMS.

## PHOTO RELEASE CONSENT

I hereby irrevocably grant to Sandwich T-Ball Association in perpetually, exclusively, and for all media throughout the world (including print, video, CD-ROM, Internet and any other electronic medium, presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footage taken of me or my family as a result of our participation in Sandwich T-Ball Association activities including, but not limited to, Practices, Games, Tournaments and Picnics. I hereby agree that I will not bring or consent to others bringing claim or action against Sandwich T-Ball Association or their registered leaders on the grounds that anything contained in the Images, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on me, violates any other right whatsoever, including, without limitation, rights of privacy and publicity. I hereby release Sandwich T-Ball Association, its directors, officers, successors and assigns from and against any and all claims, demands, actions, causes of action, suits, costs, expenses, liabilities, and damages whatsoever that I may hereafter have against Sandwich T-Ball Association in connection with the images. I also understand that this does not obligate Sandwich T-Ball Association to use the Images or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Images. Sandwich T-Ball Association shall have the right to assign its rights hereunder, without my consent, in whole or in part, to any person, firm or corporation.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ASSOCIATION USE ONLY			
BIRTH CERT	<input type="checkbox"/> YES <input type="checkbox"/> NO	CODE OF CONDUCT	<input type="checkbox"/> YES <input type="checkbox"/> NO
REGISTRATION FEE	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK	CHECK#	
VOLUNTEER FEE	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK	CHECK#	
BOARD MEMBER		DATE	