



PAID CHECK # _____

PAID CASH \$ _____

NEVADA YOUTH RECREATIONAL BASEBALL**REGISTRATION FORM**

Current grade: _____

Print Player's name _____

Birthdate ____/____/____

Street Address _____ City _____ State ____ Zip _____

1st Contact name _____, #() _____ - _____, relationship _____

2nd Contact name _____, #() _____ - _____, relationship _____

Emergency Contact (not one listed above) _____ Number () _____ - _____

Will player be participating in any other baseball program this season? ____Yes ____No

Participation in Nevada Youth Recreational Baseball requires the ability to run, throw, swing a bat and catch a ball. Additionally, participation requires the capacity to understand the rules of the game. Does your child have any current condition that limits his ability to participate in this activity? ____Yes ____No

If "yes", please explain and identify any modification that would enable your child to participate.

Please provide information about allergies or medical conditions that the coach should have in case of emergency.

I/We the parent(s) of the above named, hereby give my/our approval to participate in all the NYRB activities, including transportation to and from the activities.

I/We know that participation in baseball may result in serious injuries and protective equipment does not prevent all injuries to players. I/We hereby waive, release, absolve, indemnify and agree to hold harmless the local NYRB organizers, sponsors, participants and persons transporting my/our child to and from activities for any claim arising out of an injury to my/our child whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance.

I/We agree to return upon request any equipment issued to my/our child in as good a condition as when received except for normal wear and tear.

Parent or Guardian signature _____

Please PRINT Parent or Guardian name _____

Name of Family Health Ins./Hospitalization plan _____

Parents occupation _____

Work phone _____

Age groups as follows based on grade player is currently in (Provided adequate players for each grade level):

Grades 3-4

Grades 5-6

Grades 7-8

Registration Fee: \$80.00 (Make checks payable to Nevada Youth Recreational Baseball)

A \$10.00 LATE FEE WILL BE REQUIRED FOR REGISTRATION AFTER EVALUATION DATE.NO LATE SIGNUPS CAN BE ACCEPTED AFTER TEAMS ARE DRAFTED WITHOUT BOARD APPROVAL.T-SHIRT Size: **YS YM YL AS AM AL AXL A2X A3X**

List choice of number w/ 2 alternates in order of preference: _____

Please keep in mind this is the shirt size that will be ordered for your player for the season shirt, if they are growing order a size larger. If we have to order a new shirt due to an error in size marked above the parents will have to pay for it.