

CRITTENDEN COUNTY DUGOUT CLUB
2009 Youth Baseball/Softball
Registration Form

For Official Use:	
<input type="checkbox"/> Fee _____	<input type="checkbox"/> Check <input type="checkbox"/> Cash
<input type="checkbox"/> Late Sign Up	
Check # _____	Initials: _____

Registration form must be received by March 28, 2009 with a \$25.00 Fee *per child* and a copy of Birth Certificate for the player (*fee for T-Ball and Co-ed Rookie is \$20 per child*). If anyone registers after April 1, 2009, you will be required to pay the full fee and purchase the uniform from the Dugout Club vendor. Anyone wishing to register after April 15th will have to be approved by the Dugout Club Board of Directors.

NOTE: We reduced the fee this year due to the economy and the recent ice storm. Parents must agree to work in the concession stand to receive this reduced price. Please complete the following:

I agree to work 2 two-hour sessions (per child in the program) in the concession stand during the season.

I will not work in the concession stand (if you chose not to work, your fee will be \$45 per child in the program)

NOTICE:

1. Signup days: March 21st and 28th at Middle School Gym from 9 am to 12 noon.
2. The cutoff for age grouping for Baseball is a player turning a year older before August 1st. For Softball the date is January 1st.
3. All leagues with the exception of T-ball will have away games.
4. With the exception of T-Ball co-ed rookie league, boys must play baseball and girls must play softball.
5. Skills Assessment will be on March 21st and 28th at the Middle School Gym. All new players in any league will be required to participate in the skills assessment.

T-Ball League	<input type="checkbox"/> (ages 3-4 Boys & Girls) <i>Must turn 3 before May 1st</i>
Co-ed Rookie	<input type="checkbox"/> (ages 5-6 Boys & Girls) <i>Must turn 5 before May 1st</i>
Boys Baseball (Check One)	<input type="checkbox"/> Rookie (7 – 8) <input type="checkbox"/> Minor (9 – 10) <input type="checkbox"/> Major (11 – 12)
Girls Softball (Check One)	<input type="checkbox"/> Minor (7 – 9) <input type="checkbox"/> Major (10 – 12)

PERSONAL INFORMATION:

Player Name: _____ Age: _____ DOB: _____

Address: _____ Phone: _____

Last Team to play for: _____ Year Played _____

Shirt Size: (NOTE: Shirt size should be one size larger than normally worn)

Circle One: 6/8 10/12 14/16 Adult S Adult M Adult L Adult XL Adult XXL Other: _____

Do you want to: Coach Umpire League Commissioner Other: _____

PARENT/GUARDIAN CONSENT FOR TREATMENT:

I hereby give my consent for any treatment as provided by his/her coach or other adult escort in case of an injury or illness while participating in any practice, game or other league activity sanctioned by the Crittenden County Dugout Club. I understand that this is to prevent undue delay in treatment. Furthermore, I agree to allow my child to be taken to a licensed physician and/or their designee in the case of an emergency. I will list any allergies and/or pre-existing physical conditions that need to be noted before treatment. (*use back if needed*)

Allergies: _____ Pre-existing Conditions: _____

Mother's Name: _____ Father's Name: _____

Player Covered Under Insurance Policy: Yes No

Name of Insurance: _____ Policy #: _____

Signature: _____ Relationship: _____

Date: _____

Return to: Dugout Club PO Box 5 Marion, KY 42064