

# **GRIFFITH YOUTH BASEBALL**

# **PLAYER REGISTRATION 2021**

## **PLAYER INFORMATION**

PLAYER NAME <small>(PLEASE PRINT)</small>				<input type="checkbox"/> NEW <input type="checkbox"/> RETURNING
AGE AS OF MAY 1ST		DATE OF BIRTH	/   /	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ADDRESS/CITY/ZIP				
SHIRT SIZE	<input type="checkbox"/> YXS <input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL <input type="checkbox"/> YXL <input type="checkbox"/> AS <input type="checkbox"/> AM <input type="checkbox"/> AL <input type="checkbox"/> AXL			
PREVIOUSLY PLAYED YEARS/DIVISIONS	<input type="checkbox"/> T-BALL _____yrs	<input type="checkbox"/> ROOKIE _____yrs	<input type="checkbox"/> MINOR _____yrs	<input type="checkbox"/> MAJOR _____yrs <input type="checkbox"/> BR 13-15 _____yrs

## **PARENT/GUARDIAN INFORMATION**

HAS YOUR ACCOUNT INFORMATION CHANGED?	<input type="checkbox"/> YES, MY CONTACT INFORMATION HAS CHANGED FROM LAST YEAR <input type="checkbox"/> NO, MY CONTACT INFORMATION IS THE SAME AS LAST YEAR		
NAME <small>(PLEASE PRINT)</small>		RELATIONSHIP	
ADDRESS/CITY/ZIP <small>(IF DIFFERENT THAN PLAYER)</small>			<input type="checkbox"/> WILL MANAGE
EMAIL *REQUIRED* <small>(PLEASE PRINT)</small>			<input type="checkbox"/> WILL COACH
CELL PHONE			<input type="checkbox"/> WILL TEAM PARENT
WAIVERS	<input type="checkbox"/> I HAVE FILLED OUT THE BACK OF THIS REGISTRATION		

## **LEAGUE USE ONLY**

PLACED DIVISION	<input type="checkbox"/> T-BALL <input type="checkbox"/> ROOKIE <input type="checkbox"/> MINOR <input type="checkbox"/> MAJOR <input type="checkbox"/> BABE RUTH 13-15																				
<input type="checkbox"/> MEDICAL WAIVER <input type="checkbox"/> CODE OF CONDUCT <input type="checkbox"/> BIRTH CERTIFICATE VERIFIED <input type="checkbox"/> OTHER <u>COVID WAIVER</u>																					
<b>FEES - T-Ball \$100 / Rookie - Babe Ruth \$165</b> <small>(\$75 second player, \$60 third player / \$300 family max)</small> 1 Player: \$100 T-Ball / \$165 Rookie, Minor, Major, Babe Ruth 2 Players: \$175 T-Ball / \$240 Rookie, Minor, Major, Babe Ruth 3 Players: \$235 T-Ball / \$300 Family Max	<table> <tr> <th colspan="2">CASH/CHECK</th> <th colspan="2">CREDIT CARD</th> </tr> <tr> <th><small>T-Ball Only</small></th> <th><small>Rookie-BR</small></th> <th><small>T-Ball Only</small></th> <th><small>Rookie-BR</small></th> </tr> <tr> <td>\$100</td> <td>\$165</td> <td>\$105</td> <td>\$170</td> </tr> <tr> <td>\$175</td> <td>\$240</td> <td>\$180</td> <td>\$245</td> </tr> <tr> <td>\$235</td> <td>\$300</td> <td>\$245</td> <td>\$310</td> </tr> </table>	CASH/CHECK		CREDIT CARD		<small>T-Ball Only</small>	<small>Rookie-BR</small>	<small>T-Ball Only</small>	<small>Rookie-BR</small>	\$100	\$165	\$105	\$170	\$175	\$240	\$180	\$245	\$235	\$300	\$245	\$310
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\$100	\$165	\$105	\$170																		
\$175	\$240	\$180	\$245																		
\$235	\$300	\$245	\$310																		
TOTAL AMOUNT DUE (FOR _____ PLAYERS)	\$ _____																				
AMOUNT PAID	PAID IN FULL: <input type="checkbox"/> CASH/CHK <input type="checkbox"/> CC <input type="checkbox"/> PARTIAL PAID (\$ _____)																				
BALANCE DUE <small>(DUE BEFORE OPENING DAY)</small>	\$ _____ RECEIVED BY (GYB REP): _____																				

 **PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

By signing this form and registering my child/player, I give my permission for my child to participate in the Griffith Youth Baseball 2021 season and have certified that he/she has adequate coverage in the event of an injury during participation in this league. I will not hold Griffith Youth Baseball League, any of its Officers/Board Members/Coaches/Volunteers liable in the event that my child is injured while participating in league activities. I agree to Griffith Youth Baseball League's terms and agree to make my full registration fee payment before opening day. I understand that my child/player may not be eligible for All Stars and I may be subject to collections if my fees have not been paid. I understand that there are no refunds. By signing this form, I understand that photography or video may be taken of any league participants during any league activities for promotional use, including social media and the GYB website.

# MEDICAL WAIVER (PLEASE PRINT)

PLAYER NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

MEDICAL PROBLEMS (ALLERGIES, ASTHMA, ETC.) \_\_\_\_\_

MEDICATIONS \_\_\_\_\_

In case of an emergency, please list two different people we can contact if you are not present and we are unable to reach you:

NAME/PHONE \_\_\_\_\_ NAME/PHONE \_\_\_\_\_

I/We know that the participation in baseball may result in serious injury to my/our child. Protective equipment does not prevent all injuries to players. In case of emergency, if family physician cannot be reached, I hereby authorize \_\_\_\_\_  
to be treated by another physician who is available. *child's name*

NAME OF FAMILY PHYSICIAN \_\_\_\_\_ PHONE \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SUBSCRIBED AND SWORN BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_

NOTARY PUBLIC \_\_\_\_\_ COMMISSION EXPIRES \_\_\_\_\_

COUNTY OF \_\_\_\_\_ STATE OF \_\_\_\_\_

## CODE OF CONDUCT

We must all constantly support and encourage fair play, player safety, and sportsmanship. Parents are required to follow the Griffith Youth Baseball League Code of Conduct. Code of Conduct for Parents and Guardians:

- \_\_\_ I will always be supportive of my child, their teammates, and coaches.
- \_\_\_ I will remember that every player on the team is a contributing player.
- \_\_\_ I will spread my encouragement equitably amongst the team.
- \_\_\_ I will allow all coaching during the games to be done by the coaches and not by parents, in the stands or behind the backstop.
- \_\_\_ I will convey coaching suggestions and complaints privately to the coaches before or after games.
- \_\_\_ I will never badger the other team or argue with their supporters.
- \_\_\_ I will not argue with the umpires.
- \_\_\_ Smoking is not allowed on fields or surrounding areas of the Griffith Youth Baseball fields.
- \_\_\_ Physical violence, taunting, or any action that may provoke physical violence, by anyone during a Griffith Youth Baseball function, will be sufficient cause for the Board to exclude that person(s) from future participation or attendance at any Griffith Youth Baseball game or activity.
- \_\_\_ I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and umpires at every game, practice, or other Griffith Youth Baseball event(s).
- \_\_\_ I will be responsible for the actions of my guests.
- \_\_\_ I will stay out of the dugout.

Parents who violate these rules may be disciplined at the game (told to leave) and/or required to appear before the Board of Directors. Violations may result in a variety of consequences, including parental bans from games or other league activities. Managers are responsible for their players and for controlling their stands. Disruptive parents who do not follow coaches, umpires, or Board Members instructions may be suspended from all games the umpire may cancel the game.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_