

South Greensburg Baseball Registration 2017

New Player _____ Returning Player _____ 2016 Team _____

Age on May 1, 2017 _____ Birth Date ____ / ____ / ____

PLAYER INFORMATION:

Last Name _____ First Name _____

Address _____

City _____ PA _____ Zip Code _____

Phone # _____ Alternate # _____

Email: _____

School: _____

**BASEBALL PLAYERS WILL BE PROVIDED WITH A JERSEY AND A HAT. PANTS ARE
NOT PROVIDED, COACH WILL ADVISE AS TO COLOR NEEDED**

**SAMPLE JERSEYS WILL BE AVAILABLE TO TRY ON AT TIME OF REGISTRATION. IF YOU PICK THE
INCORRECT SIZE, THEN YOU WILL BE RESPONSIBLE FOR PURCHASING A NEW UNIFORM.
UNIFORMS WILL NOT BE ORDERED UNTIL PAYMENT IS RECEIVED BY SOUTH GREENSBURG
RECREATION. A SEPARATE FORM WILL BE PROVIDED AT REGISTRATION TO ORDER UNIFORMS.**

EMERGENCY CONTACT INFORMATION:

Name _____

Relationship _____

Phone # _____ Alternate # _____

Physician _____ Phone # _____

Physical Limits: _____

I/We the parents/guardians of the above named Participant, do hereby give approval to his/her participating in the activity checked above. I/We do further hereby release, absolve, indemnify and hold harmless, the Organizers, Recreation Personnel, Recreation Board and the Recreation Director. In case of injury to my child, I/We do hereby waive all claims against the Organizers, Sponsors or any of the Instructors or Supervisors in charge. I/We likewise release from responsibility any person or persons transporting my child to and from the above checked activity.

Parent/Guardian Signature _____ Date _____

Birth Certificate _____ On File _____

Paid \$ _____ Check # _____ Cash _____ R'cvd By _____