

# Bayard Organized Baseball

2021 Baseball and Softball Season

**Registration Deadline is April 15, 2021**

Player's name: \_\_\_\_\_ Grade: \_\_\_\_\_ Sex: M F

Birthdate: \_\_\_\_\_ Age as of 1/31/2021: \_\_\_\_\_

Parent(s)Guardian(s) name: \_\_\_\_\_

Mailing Address for player: \_\_\_\_\_

(street/ PO Box)

(City)

Physical Address for player (if different from mailing): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Shirt Size: (please circle)

Youth sm.

Youth med.

Youth lg.

Adult sm.

Adult Med.

Adult Lg.

Adult xxl

## Registration Fees: (fee includes a shirt and a hat for uniforms)

\$45 for Major ( ages 11-13 )

\$45 for Minor ( ages 9-10 )

\$45 for Rookie ( ages 7-8 )

\$35 for T-Ball ( boys and girls combined) (5-6 as of 1/31/21)

**Registration Due before April 15, 2021, or a \$ 15 late fee will be added to registrations turned in after the due date.**

**\*\* FAMILY DISCOUNT FOR FAMILIES ENROLLING 3 OR MORE PLAYERS IS \$5 OFF PER CHILD BEING REGISTERED\*\***

**\*\*\* MAKE CHECKS PAYABLE TO: *Bayard Organized Baseball***

**Your registration fee includes insurance protection. This is secondary insurance.**

I, the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules of the Bayard Organized Baseball, it's affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with baseball/softball and in consideration for Bayard Organized Baseball accepting the registrant for its baseball program and activities (The Program), I hereby discharge and/or otherwise indemnify Bayard Organized Baseball, its affiliated organizations and sponsors and associated personnel, including owners of fields and facilities utilized for the programs, against any claim by, of and on behalf of the registrant as a result of the registrant's participation in the Program and/or being transported to or from the same, which transportation I hereby authorize.

Date: \_\_\_\_\_

Signature of Parent/Guardian (required before child can play or practice)

*Completed forms can be dropped off to:*

*\*\* Elementary Principal's office in Bayard or Bayard City Office*

*\*\* Or mail to Bayard Organized Baseball, PO Box 82, Bayard, NE 69334*

**\*\*\*\*Registration DEADLINE— April 15, 2021\*\*\*\***

No registration refund will be granted after registration is received.

**\*\*\*Please consider volunteering!!!\*\*\* Circle the area you would like to serve:**

Coach.

Assistant Coach.

Team Parent ( organize treats)

## CONSENT FOR TREATMENT

*Each Player must complete and have signed*

Name of  
Player: \_\_\_\_\_

Home Address:  
\_\_\_\_\_

Family  
Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

List of any Allergies: \_\_\_\_\_

Required Medication: \_\_\_\_\_

In case of an accident or illness, I hereby authorize a representative from Bayard Organized Baseball to use his/her judgement in obtaining immediate Medical Care.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Parents will be notified in case of serious illness or injury as quickly as they can be reached, but this will make immediate treatment possible.