



BRAINTREE BABE RUTH BASEBALL LEAGUE

P.O. Box 850112  
Braintree MA 02185



SUMMER REGISTRATION - 2011

PLAYER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

FEE:

FIRST CHILD: \$125.00 SECOND CHILD: \$75.00 MAXIMUM PER FAMILY: \$200.00

*Make checks payable to BRAINTREE BABE RUTH*

I/We will be held responsible for all uniforms and equipment issued to my/our son/daughter. I/We will pay a \$75 replacement fee if my son/daughter's uniform is not returned at the end of the season. I/We understand that my son/daughter must participate in fund raising activities.

Having been informed of the organization of THE BRAINTREE BABE RUTH LEAGUE to provide supervised baseball games for boys/girls, I/We the parents/guardians of the above named candidate do hereby give approval to his/her participation in any and all of the activities during the upcoming season. I/We hereby release, absolve, indemnify, and hold harmless, THE BRAINTREE BABE RUTH LEAGUE, the organizers, sponsors, officers and any of the supervisors appointed by them. I/We likewise release them from responsibility, any person transporting my/our son/daughter to or from the activities.

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

LEAGUE USE: CHECK \_\_\_\_\_ FAMILY PLAN \_\_\_\_\_ REC'D BY \_\_\_\_\_ AMOUNT \_\_\_\_\_