



BRAINTREE BABE RUTH BASEBALL

SENIOR LEAGUE

2011 REGISTRATION FORM

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

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

Email Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Mobile: (optional) \_\_\_\_\_

First Child: \$175.00 Second Child: \$100.00 Maximum Per Family: \$250.00

Date of Birth: \_\_\_\_\_

2010 Team: \_\_\_\_\_ Position Played: \_\_\_\_\_

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 for any uniform or equipment that **is not returned** to the League at the end of the season. I/We do understand that my/our, son/daughter must participate in fundraising activities for the league.

Having been informed of the organization of the BRAINTREE BABE RUTH LEAGUE, INC. and the BRAINTREE BABE RUTH LEAGUE, INC. SENIOR LEAGUE BASEBALL PROGRAM (collectively "Program") to provide supervised baseball games for boys/girls, I/We the parents or legal guardians of the above named player ("Registrant") do hereby give approval to his/her participation in any and all activities of the Program during the 2009 season. I/We hereby acknowledge and agree that (a) it is our obligation to provide the Registrant with transportation to and from Program activities and (b) the Program and its coaches and managers are not responsible for providing transportation for the Registrant to and from Program activities. I/We hereby release, absolve, indemnify and hold harmless the program, and any of the Program's organizers, sponsors, officers, coaches, managers and any of the supervisors appointed by them of and from any liability, loss, costs or damages sustained or incurred by us or the Registrant in connection with his/her participation in activities of the Program and/or transportation to and from activities of the Program. Without limitation, I/We likewise release from responsibility and agree to indemnify and hold harmless any person transporting my/our, son/daughter to or from Program activities.

I/We are able to furnish a copy of the birth certificate of the above named registrant.

\_\_\_\_\_  
(Parent or legal guardian's signature)

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

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League Use Only:

Check#: \_\_\_\_\_ Cash: \_\_\_\_\_ Family Plan & Other Team Name: \_\_\_\_\_ Recv'd by: \_\_\_\_\_