

## American Legion Youth Baseball 2012 Registration Form

Player's Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Player's Date of Birth: \_\_\_\_\_ Parent Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Parent Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Jersey Size: \_\_\_\_\_

Level of Play (circle one)	D League (5-6 years of age)	\$65.00
	C League (7-8 years of age)	\$100.00
<b><u>Subtract \$25 for siblings</u></b>	B League (9-10 years of age)	\$100.00
(ex. 2 children = \$175)	A League (11-12 years of age)	\$100.00
(ex. 3 children = \$250)	Pony League (13-14 years of age)	\$115.00
	Fundraising Reduction	- _____
	<b>Total Due</b>	

New Player:            Yes    No                      Sibling Assigned:    Yes    No

Returning Player:    Yes    No                      Team: \_\_\_\_\_

Request Draft:        Yes    No

- 1) I understand that I am responsible for medical coverage for my child while on American Legion property and/or participating in youth baseball activities on and off American Legion property.
- 2) I understand that parents/guardians are expected to assist in the concession stand when my child/children's team is scheduled.
- 3) I authorize the ALYB Board to use my child's likeness and other information that directly relate to his/her ALYB baseball team on the league website.
- 4) I acknowledge that I paid the registration fees in the amount of \$\_\_\_\_\_ with:

(circle one)            Cash                      Check #: \_\_\_\_\_                      Money Order

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

Parent/Guardian

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

Legion Rep.

*\*\*ALYB is in need of parents that are interested in Coaching. If you or someone you know is interested in coaching a team this year, please list their name and contact number:*

Name \_\_\_\_\_ Number \_\_\_\_\_

Check out announcements and season updates on our website!!

[www.alyb.org](http://www.alyb.org)