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Marlboro Babe Ruth Baseball "A United Way Agency"

BABE RUTH FALL LEAGUE

PLAYER REGISTRATION FORM

| | |
|------------|--|
| Date _____ | |
| Paid | <input type="checkbox"/> Check _____ <input type="checkbox"/> Cash _____ |

- 1) For League Age Players League Age 12/13 (Cal Ripken & Prep) and League Age 14/15 (Jr Babe) Years Old
 2) Your 2010 League Age is how old you were on April 30, 2010

| | Player's Full Name | Sex M/F | Date of Birth XX/XX/XX | League Age | | Amount |
|-----------------------|--------------------|------------|---------------------------|---|---|--------|
| | | | | Prep Div | Jr Division | |
| 1 | | | | 12 <input type="checkbox"/> 13 <input type="checkbox"/> | 14 <input type="checkbox"/> 15 <input type="checkbox"/> | \$75 |
| 2 | | | | 12 <input type="checkbox"/> 13 <input type="checkbox"/> | 14 <input type="checkbox"/> 15 <input type="checkbox"/> | \$75 |
| 3 | | | | 12 <input type="checkbox"/> 13 <input type="checkbox"/> | 14 <input type="checkbox"/> 15 <input type="checkbox"/> | \$75 |
| Total Amount Enclosed | | | | Deduct \$5 only if paid before Aug 1, 2010 | | |

PLEASE PRINT NEATLY!

| | | | |
|-------------------|--|--------------------------|--|
| Player's Address: | | Parent/Guardian Name(s): | |
| Email Addr (1) | | Email Addr (2) | |
| Home Phone: | | Cell Phone: | |
| | | Addition Phone: | |

LEAGUE STRUCTURE/ WAIVER

Welcome to Marlboro Babe Ruth Fall Ball League. This is an inter-town instructional league and games are played with and in surrounding communities. Games are played on weekends only. This season begins on Sat 9/11/10 and runs until Sun 10/31/20 League fees, umpire fees, equipment and uniforms are included in the registration fee. Marlborough Youth Baseball does provide medical insurance for both volunteer managers and players with a \$100 deductible. All parents are required to help in the Concession Stand and operate the scoreboard occasionally.

I, the undersigned parent or guardian of the above named child/children, who has/have been accepted as a member of the MARLBOROUGH YOUTH BASEBALL ASSOCIATION, INC. do hereby give my approval to his/her participation in any of the activities of the association during the coming season and release and forever discharge the Association and /or its sponsors, officers, agents, servants, representatives, successors and assignees from all claims I as his/her parent/guardian, may have against it resulting from personal injury, property damage or loss from any ordinary negligence. I/We understand all rules and regulations of MYBA and understand that they are posted on the website.

Parent/Guardian X _____ Date _____

PARENTAL PARTICIPATION

The quality of the MYBA program is directly related to the amount of adult participation. All parents will be required to work a shift in the concession stand during the season. Please indicate your choice(s) below:

| | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> TEAM MANAGER | <input type="checkbox"/> TEAM SPONSOR (\$275) | DONATION IN LIEU OF VOLUNTEERING: |
| <input type="checkbox"/> TEAM COACH | | <input type="checkbox"/> \$50 <input type="checkbox"/> \$75 <input type="checkbox"/> \$100 <input type="checkbox"/> \$ _____ |
| <input type="checkbox"/> TEAM PARENT | | |

Mail This Form W/ Check To: MYBA c/o Pete Coppola 114 Naugler Ave., Marlborough, Ma. 01752
Application must be received by Sept 4, 2010 – SPACE MAY BE LIMITED
 For further information, call (774) 249-8289 Pete Coppola or visit our website
<http://www.495baberuth.org>.

CHECKS SHOULD BE MADE PAYABLE TO
“MARLBORO BABE RUTH BASEBALL”