

ESTEVAN MINOR BASEBALL ASSOCIATION REGISTRATION FORM

The registration form and fee must be handed in at the Estevan City Wide Registration on
April 2, 2009 from 6 – 9 pm at the Souris Valley Leisure Centre Multipurpose Room

NAME: _____ Male/Female Birth Date: _____

Address: _____ AGE as of January 1, 2009: _____

Phone: _____ E-mail: _____

*please put e-mail if you have it!

PLEASE CIRCLE THE YEAR YOUR CHILD WAS BORN AND THE LEAGUE.

		Registration Fees					
		League Fee	Insurance	Coach Fee	User	Umpire Fee	Total
2002/2003/2004 (4,5,6 year olds)	Blast-O-Ball Monday/Wednesday	\$20.00	\$12.00	\$5.00	\$20.00	\$0.00	\$57.00
2001/2002 (6, 7 year olds)	Junior Rookieball (Mites) Monday/Wednesday	\$20.00	\$12.00	\$5.00	\$20.00	\$0.00	\$57.00
2000/2001	Senior Rookieball (Mites) Tuesday/Thursday	\$35.00	\$12.00	\$5.00	\$20.00	\$3.00	\$75.00
1998/1999/2000	Mosquito Tuesday/Thursday	\$35.00	\$12.00	\$5.00	\$20.00	\$3.00	\$75.00
1996/1997	Pee Wee Monday/Wednesday	\$40.00	\$12.00	\$5.00	\$20.00	\$3.00	\$80.00
1994/1995	Bantam Monday/Wednesday	\$40.00	\$12.00	\$5.00	\$20.00	\$3.00	\$80.00
1991/1992/1993	Midget Monday, Tuesday, Wednesday or Thursday	\$55.00	\$12.00	\$5.00	\$20.00	\$3.00	\$95.00

PAYMENT OPTIONS: Estevan Minor Baseball will accept a post-dated cheque or multiple post-dated cheques to accommodate your needs. The last date for post-dated cheques will be May 1, 2009.

Parent Authorization

I, the parent of the above named candidate for a position on the said Minor Ball Team, hereby give my approval for his/her participation in any and all activities during the current season. **I DO HEREBY WAIVE, INDEMNIFY, ABSOLVE AND AGREE**, to hold harmless the Estevan Minor Baseball Association, The Saskatchewan Baseball Association, the organizers, sponsors, supervisors, participants and persons transporting my child to and from any and all said activities. (Batters and base runners will wear helmets and coaches will take all possible care to avoid accidents.)

I agree to return the uniform and any other equipment issued to my child in as good condition as when it was received, except for normal wear.

DATE: _____ PARENT NAME (print) _____ PARENT SIGNATURE: _____

YOUR HELP IS NEEDED!!!!!!

WE NEED VOLUNTEERS, PLEASE COME HELP YOUR KIDS & HAVE FUN TOO!!!

I WOULD LIKE TO ASSIST IN: COACHING ASSISTANT COACHING

CONTACT PERSONS: Teresa Stovin 634-3857 or Kent Phillips 421-6670

For more info: <http://www.estevanminorbaseball.com>