

# ODC Baseball Registration Form Spring 2009

Player: \_\_\_\_\_ Birthday: \_\_\_\_\_ Current Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ School: \_\_\_\_\_

Uniform Size – Shirt: \_\_\_\_\_

Father: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mother: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If Divorced, indicate custodial parent: \_\_\_\_\_

If Legal Guardian, check here: \_\_\_\_\_

May we count on you to do any of the following?

Coach: \_\_\_\_\_ Assistant Coach: \_\_\_\_\_ Team Mom: \_\_\_\_\_

Keep Score: \_\_\_\_\_ Sponsor a Team: \_\_\_\_\_

I hereby certify that the child listed above has my approval and consent to participate in Oaks Dads' Club sports activities. I also understand and agree that I will assume all risks and hazards incidental to these activities and transportation to and from these activities. In addition, I will hold harmless the Oaks Dads' Club, its directors, officers and volunteers, including any sub-boards of the Oaks Dads' Club, their officers and volunteers. I also understand and agree that Oaks Dads' Club bears no responsibility for any accident or injury as a result of participation in any Oaks Dads' Club activities. I also agree that any medical cost associated with such injury shall be my responsibility and not Oaks Dads' Club. Oaks Dads' Club may, at its discretion, require the purchase of insurance to cover such accidents but does not bear any added duty or responsibility as a result of that requirement. In addition, I agree to participate in Club fundraising activities and agree to fulfill the required fundraising commitment following all associated rules. My family and I agree to respect all facilities and follow all facility rules. I have received a copy of Oaks Dads' Club rules and understand that if my family or I break any of these rules our membership is subject to revocation.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Printed Name

Date: \_\_\_\_\_

PLEASE DO NOT WRITE BELOW THIS LINE

Player's age as of 04/30/09: \_\_\_\_\_

League: \_\_\_\_\_

Player Number: \_\_\_\_\_