



BABE RUTH BASEBALL REGISTRATION FORM

NOTTINGHAM YOUTH ASSOCIATION, INC.
PO BOX 98, NOTTINGHAM, NH 03290-0098
www.nottingham-nya.org



Registration Form

PLEASE PRINT FIRMLY AND LEGIBLY

Player's Last Name		First Name		<input type="checkbox"/> M	<input type="checkbox"/> F	Age On 4/30/10
Player's Street Address						DOB
Player's Mailing Address						Phone
Mother's Name	Home #	Cell #	Email			
Father's Name	Home #	Cell #	Email			

Person to Notify in an Emergency _____ **Phone #** _____

I/We, the parent/guardian of the above named candidate for a position on a Nottingham Youth Association Inc. team, hereby give my/our approval to participate in any and all Nottingham Youth Association Inc. activities, including transportation to and from the activities. I know that participation in baseball or softball may result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve indemnify and agree to hold harmless Nottingham Youth Association Inc., Lamprey River Babe Ruth Baseball, Babe Ruth Baseball, Inc, The Town of Nottingham, Nottingham School District, the organizers, sponsors, supervisors, participants and persons transporting my child to and from activities from any claim arising out of any injury to my child whether the result of negligence or any other cause. I agree to return upon request the uniform and other equipment issued to my child in as good a condition as when received except for normal wear and tear. I will furnish a birth certificate to the above named candidate to League Officials.

Parent/Guardian Signature _____ Date _____

MEDICAL (MINOR) TREATMENT CONSENT

In case of emergency, if the family physician or dentist cannot be reached, I hereby authorize the above named player to be treated by another qualified, licensed physician or dentist who is available.

Parent/Guardian Signature _____ Date _____

List any problems or medical conditions the player has _____

Please Select Desired Level of Play

Babe Ruth Prep Age 13 (age as of 4/30/10)

Babe Ruth Ages 14-15 (age as of 4/30/10)

PARENTAL SUPPORT

The NYA is an all-volunteer organization; consequently, participation is expected of ALL parents.

Please indicate how you will contribute to your child's team below:

Team Manager Assistant Coach Team Parent Field Maintenance Concessions Sponsor

PROGRAM FEES

The Babe Ruth level of baseball carries the additional cost of **paid umpires**; consequently, the cost to run this program is significantly higher than the lower level programs.

Babe Ruth Baseball Program Fee: \$100 per child **Late Fee (After 3/1/10):** \$10 Per Child

LEAGUE USE ONLY: Check or Money Order # _____ Player Registration Fee \$ _____ Late Fee \$ _____