

PLEASE MAIL FORM AND REGISTRATION FEE(S) TO
LWAYBSA, PO Box 141, LAMBERTVILLE NJ 08530

LAMBERTVILLE-WEST AMWELL BASEBALL AND SOFTBALL ASSOCIATION

PLAYER REGISTRATION-PARENTAL CONSENT FORM, 2018

The Lambertville-West Amwell Baseball and Softball Association (LWAYBSA) is an organization committed to providing children from Lambertville, West Amwell, Stockton, and neighboring communities the opportunity to learn and compete in baseball and softball.

PLAYER'S NAME _____ GRADE _____ SCHOOL _____

ADDRESS _____

HOME PHONE _____ DATE OF BIRTH _____ AGE _____ GENDER _____
(as of April 30, 2018)

PLAY IN THE LWAYBSA LAST YEAR? Y N IF YES, PREVIOUS TEAM _____

SHIRT SIZE (circle one): Youth S M L Adult S M PANTS SIZE (circle one): Youth S M L Adult S M

FATHER'S NAME _____ PHONE _____
HOME WORK/CELL

MOTHER'S NAME _____ PHONE _____
HOME WORK/CELL

EMAIL ADDRESS _____

EMERGENCY CONTACT: _____ PHONE _____

2016 DIVISIONS AND FEES (Circle the division where you want your child to play)

T-ball (boys and girls, age 5 and 6: \$90

Rookie Baseball (age 7-8): \$90

1st and 2nd Grade Softball: \$90

Minors Baseball (age 9-10): \$150

3rd and 4th Grade Softball: \$120

Majors Baseball (age 11-12): \$150

5th and 6th Grade Softball: \$120

The second child registered in a family, along with each subsequent child registered by that family, receives a \$25 discount if the registration is received before February 15. Discounts are applied to the player(s) in the lower divisions.

There will be a 10 percent penalty added to registrations received after February 15, and a 20 percent penalty for registrations received after March 6. The primary reason for late fees is driven by uniform orders. We are charged additional rush fees for uniform orders placed after mid-February that the league cannot absorb.

Make Check Payable to: LWAYBSA.

Mailing Address: LWAYBSA, PO Box 141, Lambertville NJ 08530

PARENTAL CONSENT FORM

I am a parent or the legal guardian of the above listed child. I give permission for the above listed child to participate in the 2018 LWAYBSA program. I hereby release from responsibility any persons transporting my child to or from any LWAYBSA activity. I grant permission for my LWAYBSA to use the name, likeness, photos or words of the player in newspapers and other media for the purpose of communicating LWAYBSA activities. My submission of this registration constitutes a written agreement that my family and I will follow the LWAYBSA Athletic Code of Conduct Policy that can be found on our league website.

Medical Waiver

Recognizing the possibility of physical injury associated with baseball and softball and in consideration for Lambertville-West Amwell Youth Baseball and Softball Association (LWAYBSA) accepting the registrant for its baseball/softball programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify LWAYBSA, its affiliated organizations and sponsors, associated personnel, including the owner of fields and facilities utilized for the Programs against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

My son/daughter has received a physical examination by a physician and has been found physically capable of participating in the Programs. I hereby give my consent to have an athletic trainer and/or doctor of medicine or dentistry provide my son/daughter with medical assistance and/or treatment and agree to be responsible financially for the cost of each assistance and/or treatment.

Parent/Guardian _____ **(please print)**

Signature _____ **Date** _____

The LWAYBSA is an Equal Opportunity organization and would not discriminate against a player or a family based on race, creed, religion, color, national origin, ancestry, familial status, or nationality.