Minors
Boys Ages 9 & 10

Last Name	First Name	**Age on 6/1/2010**
Address	City	Birthdate
E Mail Address	Phone	Cell Phone

Birth Certificate On File: _____ Attached: _____ Other: _____

I, in consideration of the permission hereby granted for my child to participate in this program, sponsored by the Streetsboro Junior Baseball & Softball Organization, agree to assume the risk for any and all personal injuries to my child or property damage, and to hold harmless their officers, agents and volunteers from any and all injuries or property damage arising from this event, and hereby release any and all claims of any nature.

Signed parent or guardian understands that he/she must grant permission for emergency first aid or other life sustaining medical procedures, by a qualified and licensed individual, on the child and must assume financial responsibility for any and all injuries, to include any and all ambulance and hospital costs.

Signed parent or guardian and child agree to obey all rules and regulations set forth by the Streetsboro Junior Baseball & Softball Organization or their agents, and voluntarily agree to participate and obey the assigned manager, coach, supervisor, or agent of the league.

Signed parent or guardian is aware of the risks involved in this event and maintains that his/her child is physically fit to participate.

REFUND POLICY: Streetsboro Junior Baseball and Softball will refund 100% of the costs paid up until the point of the league draft. After the league draft, refunds will not be allowed.

Please list medical restrictions or disabilities: _____

Signature: _____ **Relationship:** _____

PHOTO RELEASE

I hereby grant permission to the Streetsboro Junior Baseball & Softball Organization to reprint photographs of my child participating in Streetsboro Junior Baseball & Softball Organization's activities on promotional flyers, information brochures, or on the organization's website. I understand the photos will not be used or sold for profit making or commercial purposes.

Signature: _____ **Relationship:** _____

Uniform Information

Shirt Size (Circle size below)	Pant Size (Circle size below)	Sock Size (Circle size below)
YS YM YL YXL AS AM AL AXL	YS YM YL YXL AS AM AL AXL	S M L

Registration Fees	**$65.00**
2 Aeros Tickets	**$16.00**
LATE FEE	**$10.00**
TOTAL	**$91.00**
Add'l Tickets __ x$8	
Amount Due	

Amount Paid	
Cash	
Check #	
Credit Card	**MC VISA DISC**
Balance Due	