



Weston Baseball Association

2017 REGISTRATION FORM

**PAYMENT
OPTIONS**

Completed registration form and payment can be made online at www.westonbaseball.ca or emailed to info@westonbaseball.ca or presented in person or mailed to: **Weston Baseball Association, 78 King Street, Toronto, Ontario M9N 1L3.**

Cheques should be made payable to Weston Baseball Association (All NSF cheques subject to a \$25 charge)

Full payment must be received by May 1, 2017 to be eligible for the 2017 Season!

Refund Policy: No refund will be issued unless request is submitted in writing to the address above. Refund requests received by March 15 will be given a full refund. No refunds will be issued for requests that are in writing or if received after March 15.

Form to be completed in full by parent or legal guardian and send along with cheque to address above. Any questions please call **416-782-1212**.

Player's Last Name: _____ First Name: _____

Player's Address: _____ Apt#: _____ City: _____ Postal: _____

Home Phone: _____ Cell: _____ E-mail: _____

Emergency Contact: _____ Phone: _____ School Name: _____

Gender: Male Female Date of Birth: ____/____/____ Birth Registration #: _____
month day year Copy Enclosed: Yes No

Allergies or Illness (please specify): _____

Has your child played baseball before? No Yes How many years? _____ For what league? _____

Will your child be playing all summer? No Yes, except approx. ____ weeks. Please specify dates if known _____

Do you have your own transportation? No Yes

Program	Birth Year	House League Fees	*Select Fees	Program	Birth Year	House League Fees	*Select Fees
T-Ball	2010, 2011, 2012, 2013	\$120	_____	Bantam	2002 and 2003	\$200	\$125
Rookie Ball	2008 and 2009	\$140	\$125	Midget	1999, 2000, 2001	\$225	\$125
Mosquito	2006 and 2007	\$170	\$125	Junior	1996, 1997, 1998	\$400	_____
Pee Wee	2004 and 2005	\$180	\$125	*Select Fees: If participating on a Select Team additional Select Fees apply in addition to House League Fees and are due before May 1, 2017.			

If requested, players must supply proof of age in form of a photocopy of Birth Certificate.

I hereby certify that I am the parent or legal guardian of the player named above, and I give my consent for my child to participate in any and all activities of the Weston Baseball Association. I assume all risks and hazards incidental to such participation including transportation to and from the activities, and do hereby waive, release, absolve, indemnify and agree to hold harmless the Weston Baseball Association, the organizers, supervisors, coaches, umpires, sponsors, participants, persons transporting the player to and from activities, or other persons from any claim arising out of an injury to the above player, except to the extent and in the amount covered by accident and/or liability insurance held by the Weston Baseball Association. I ensure that the above-named player will obey all league rules and regulations and that he/she is in good health and able to participate in any and all league activities. I also understand that the Weston Baseball Association retains the right to use, for publicity and advertising purposes, photographs of players registered with the Weston Baseball Association. I have read and have accepted the terms listed above.

I am registering 2 or more children from the same family and the same address and thus qualify for the Family Discount rate of a \$10 reduced fee for the second child and each additional child in my family (i.e. the regular fee for the first child and \$10 off the regular fee for each additional child). A receipt can be downloaded from our website www.westonbaseball.ca for the Child's Fitness Tax Credit.

Date: ____/____/____ Signature of Parent/Guardian: _____ Print Name: _____
month day year

VOLUNTEERS NEEDED - DON'T SIT ON THE SIDELINES – GET INVOLVED IN THE GAME . . . Weston Baseball cannot operate without volunteers. We are looking for coaches, assistant coaches and any other help you can give. No experience is necessary and we'll provide initial help. Please offer your time to assist. Our children thank you.

I would like to help: Coach Assistant Coach Sponsor a Team Other _____

Please complete If your child is registering with us for the first time. How did you find out about our league? (check one)

School Flyer in Store Mail Friend (name _____) Coach Newspaper Website Sign Other _____

FOR OFFICE USE ONLY – MUST BE FILLED OUT AT TIME OF REGISTRATION

Registration Payment: NOT RECEIVED Received: CHEQUE CASH ONLINE