



# Weston Baseball Association

## 2022 REGISTRATION FORM

### PAYMENT OPTIONS

Completed registration form and payment can be made online at [www.westonbaseball.ca](http://www.westonbaseball.ca) to interac e-transfer emailed to [info@westonbaseball.ca](mailto: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 accompany registration!

**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	2015, 2016, 2017, 2018	\$150	—	15U	2007 and 2008	—	\$450
9U	2013 and 2014	\$170	\$360				
11U	2011 and 2012	\$200	\$400				
13U	2009 and 2010	\$225	\$425				

**\*Select Fees:** If participating on a Select Team, Select Fees include the House League Fees and are due before March 31, 2022.

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](http://www.westonbaseball.ca)

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