

## BEECHER RECREATION REGISTRATION FORM

Baseball  Softball  T-Ball  Basketball (Co-ed)  Volleyball  \_\_\_\_\_ Grade: \_\_\_\_\_

Attending School:  Beecher Elem.  Zion  Other \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Parents Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  Boy  Girl

Does your child have any medical problems or conditions such as asthma, epilepsy? Is your child taking medication?  
If so please explain: \_\_\_\_\_

UNIFORMS			
<p style="text-align: center;"><b>SHIRT SIZE</b></p> <p style="text-align: center;"><b>YOUTH</b></p> <p><input type="checkbox"/> Small 6-8</p> <p><input type="checkbox"/> Medium 10-12</p> <p><input type="checkbox"/> Large 14-16</p> <p><input type="checkbox"/> Youth X-Large</p> <p style="text-align: center;"><b>ADULT</b></p> <p><input type="checkbox"/> Small</p> <p><input type="checkbox"/> Medium</p> <p><input type="checkbox"/> Large</p> <p><input type="checkbox"/> X-Large</p>	<p style="text-align: center;"><b>BASEBALL PANTS</b></p> <p style="text-align: center;"><b>YOUTH</b></p> <p><input type="checkbox"/> Small</p> <p><input type="checkbox"/> Medium</p> <p><input type="checkbox"/> Large</p> <p><input type="checkbox"/> Youth X-Large</p> <p style="text-align: center;"><b>ADULT</b></p> <p><input type="checkbox"/> Small</p> <p><input type="checkbox"/> Medium</p> <p><input type="checkbox"/> Large</p> <p><input type="checkbox"/> X-Large</p>	<p style="text-align: center;"><b>SOFTBALL SHORTS</b></p> <p style="text-align: center;"><b>YOUTH</b></p> <p><input type="checkbox"/> Small</p> <p><input type="checkbox"/> Medium</p> <p><input type="checkbox"/> Large</p> <p><input type="checkbox"/> Youth X-Large</p> <p style="text-align: center;"><b>ADULT</b></p> <p><input type="checkbox"/> Small</p> <p><input type="checkbox"/> Medium</p> <p><input type="checkbox"/> Large</p> <p><input type="checkbox"/> X-Large</p>	<p style="text-align: center;"><b>WOULD YOU LIKE TO HELP IN:</b></p> <p><input type="checkbox"/> Coaching</p> <p><input type="checkbox"/> Sponsor a Team</p> <p><input type="checkbox"/> Team Parent</p> <p><input type="checkbox"/> Other _____</p> <hr/> <p>PAID \$ _____</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Cash</p> <p>Check # _____</p>

### Baseball/Softball Only

5-6 Years Old (T-Ball) Co-Ed **AGE AS OF Sept. 1st**

**BOYS AGES AS OF May 1st**

- 7-8 Yrs Old (Pinto)
- 9-10 Yrs Old (Mustang)
- 11-12 Yrs Old (Bronco)
- 13-14 Yrs Old (Pony - if enough kids sign up)
- 15-16 Yrs Old (Colt - if enough kids sign up)

**GIRLS AGES AS OF Sept 1st**

- 7-8 Yrs Old (Rookies)
- 9-10 Yrs Old (Pixies)
- 12 & Under
- 14 & Under
- ASA Traveling Team (See Coordinator for more info)

### Insurance Waiver and Consent

We, the parents or guardian, are aware that our son/daughter may be involved in an activity which tend to have a higher risk of accident than usual. We, the parents, or guardian, of the above named child assume the responsibility for medical insurance, liability, and cost of an accidental nature to our children. We, or I WILL NOT hold Beecher Recreation liable due to unforeseen accidental injury while participating in a sport in which Beecher Recreation was associated with. I understand that in the event of a sudden illness or injury to a player, emergency medical services will be called. The recommendation of the emergency medical team will be followed. This applies to all activities both at home or out of town.

The purpose of this waiver is to indicate that you have insurance to cover any cost that would result due to an injury or accident to your child or children. We, or I, feel our accident or hospitalization insurance is sufficient to cover any accident which may occur while participating in activities associated with Beecher Recreation.

\_\_\_\_\_  
**Parent or Guardian Signature**

\_\_\_\_\_  
**Date**

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