



Uxbridge Youth Baseball 2010 Season Registration

Please fill out this form and return it to the Registrar *with your cheque for the season's fees in full*, made out to the Uxbridge Youth Baseball Association (UYBA). This form is not designed to be filled out online.

Player Information: Name: _____

Birthdate: D _____ M _____ Y _____ Prior Baseball Experience: _____ years

Gender (circle one): **M** **F** Health Card #: _____

Address: _____ City/Town: _____

Postal Code: _____ Home Phone: _____

Does this player want to try out for a Select team? (Check if yes) (*Extra fees will apply*)

Health Concerns: _____

Other Comments: _____

Year of Birth	Division of Play	BY May 1	Full fee
2005-2006	<input type="checkbox"/> Blast Ball	\$65	\$75
2003-2004	<input type="checkbox"/> Tee-Ball	\$110	\$120
2001-2002	<input type="checkbox"/> Rookie Ball	\$140	\$150
1999-2000	<input type="checkbox"/> Mosquito	\$140	\$150
1997-1998	<input type="checkbox"/> Peewee	\$160	\$170
1995-1996	<input type="checkbox"/> Bantam	\$160	\$170
1993-1994	<input type="checkbox"/> Midget	REP A	REP A

Preferred Shirt Size		Preferred Pant Size	
Youth Small	<input type="checkbox"/>	Youth Small	<input type="checkbox"/>
Youth Medium	<input type="checkbox"/>	Youth Medium	<input type="checkbox"/>
Youth Large	<input type="checkbox"/>	Youth Large	<input type="checkbox"/>
Youth X-Large	<input type="checkbox"/>	Youth X-Large	<input type="checkbox"/>
Adult Small	<input type="checkbox"/>	Adult Small	<input type="checkbox"/>
Adult Medium	<input type="checkbox"/>	Adult Medium	<input type="checkbox"/>
Adult Large	<input type="checkbox"/>	Adult Large	<input type="checkbox"/>
Adult X-Large	<input type="checkbox"/>	Adult X-Large	<input type="checkbox"/>

League Use Only: PAID amount \$ _____	Cheque # or cash _____
Authorized signature: _____	Date _____

Guardian Information: Name: _____

Address: _____ City/Town: _____

Postal Code: _____ Home Phone: _____ Other Phone: _____

Email address: _____

- I would like to participate as a (check all that apply)
- Sponsor
 - Convener or other Executive member
 - Coach or Assistant (see Info Sheet for meeting & clinic dates)
 - Occasional helper (e.g. at dances & tournaments)
 - Office helper (e.g. with phone calls, lists &c)

Guardian Statement:

I understand that the sport of baseball is not without risk of personal injury. While every effort will be made to ensure that players have a safe & enjoyable season, there remains an element of risk. My signature below acknowledges that risk and relieves the coaching staff, the Uxbridge Youth Baseball Association (UYBA) and all team or league sponsors from any and all liabilities in connection with any Association event including but not limited to practices, games, tournaments and travel.

If the preceding box is checked then I further give permission for pictures of this player to appear on bulletin boards, brochures or other materials associated with UYBA.

Guardian Signature: _____ Date: _____

Guardian Comments: _____

We believe this activity to be eligible for the Canadian Revenue Agency's Children's Fitness Tax Credit. For more information, please see the relevant web page at <http://www.cra-arc.gc.ca/whatsnew/fitness-e.html>. If you have any questions please contact our Registrar Kat Weir at 905-862-0167 or registrar@uyba.ca. Your receipt will entitle your player to a 10% discount on all eligible baseball equipment at the Uxbridge Canadian Tire store – offer valid until June 30, 2010.