

CAPAC YOUTH BASEBALL LEAGUE

PO Box 557 - Capac - MI - 48014

Registration Form 2022

First Name: _____ Last Name: _____ Address: _____ Date of Birth: _____ Apt/PO: _____ City: _____ State: _____ Postal Code: _____ School: _____ Home Phone: _____ Best Phone: _____ Email Address: _____ Parent 1 First Name: _____ Last Name: _____ Best Phone: _____ Email Address: _____ Parent 2 First Name: _____ Last Name: _____ Best Phone: _____ Email Address: _____		Age Cut Off Dates Girls January 1st Boys May 1st Age on Cut Off Date: _____ Grade on Cut Off Date: _____ Shirt Size: <input type="checkbox"/> Youth Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Youth Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Youth Large <input type="checkbox"/> Adult X-Large <input type="checkbox"/> Youth X-Large <input type="checkbox"/> Adult 2X-Large <input type="checkbox"/> Adult Small <input type="checkbox"/> Other _____				
LEAGUE USE ONLY Date Paid: _____ <input type="checkbox"/> Cash <input checked="" type="checkbox"/> # _____ Reg\$: _____ Late: _____ Total Paid: _____	DIVISIONS: Please Check the Appropriate Division <table style="width:100%;"> <tr> <th style="text-align: left;">Baseball</th> <th style="text-align: left;">Softball</th> </tr> <tr> <td> <input type="checkbox"/> 5U T-Ball \$55.00 <input type="checkbox"/> 8U Coach Pitch \$60.00 <input type="checkbox"/> 10U Minors \$65.00 <input type="checkbox"/> 12U Majors \$75.00 <input type="checkbox"/> 15U Babe Ruth \$85.00 <input type="checkbox"/> 6u Boys & Girls \$60.00 </td> <td> <input type="checkbox"/> 8U Coach Pitch \$60.00 <input type="checkbox"/> 10U Minors \$65.00 <input type="checkbox"/> 12U Majors \$75.00 <input type="checkbox"/> 15U Juniors \$85.00 NO REFUNDS AFTER APRIL 1st </td> </tr> </table>		Baseball	Softball	<input type="checkbox"/> 5U T-Ball \$55.00 <input type="checkbox"/> 8U Coach Pitch \$60.00 <input type="checkbox"/> 10U Minors \$65.00 <input type="checkbox"/> 12U Majors \$75.00 <input type="checkbox"/> 15U Babe Ruth \$85.00 <input type="checkbox"/> 6u Boys & Girls \$60.00	<input type="checkbox"/> 8U Coach Pitch \$60.00 <input type="checkbox"/> 10U Minors \$65.00 <input type="checkbox"/> 12U Majors \$75.00 <input type="checkbox"/> 15U Juniors \$85.00 NO REFUNDS AFTER APRIL 1st
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MEDICAL HISTORY: Medications, Allergies and Special Conditions. _____ _____ _____		Emergency Contact Information Name: _____ Phone: _____				
Please List Any Activities Your Child Will Be Involved In During The Season 1. _____ 2. _____ 3. _____ 4. _____	Any Special Notes _____ _____ _____ _____	Fee Worksheet 1. Division Fee (+) \$ _____ 2. Late Fee (+) \$ _____ Total Payment Included \$ _____				
Capac Youth Baseball League will provide a team shirt and cap. All Players 12 and under will need to provide their own pants and shoes, as well as gloves. Boys must provide and wear a protective cup at all times. No jewelry will be allowed.		Please visit our web information at www.capacbaseball.org for League news and updates. We will be updating our link as much as possible throughout the year, so please check back often. Send questions by email to maryrille1@aol.com				
MEDICAL AUTHORIZATION / PERMISSION TO PLAY GRANT OF CONSENT						
In the event reasonable attempts to contact the parents or guardians have been unsuccessful, I hereby give my consent for the administration of any treatment deemed necessary by a Physician, Dentist or Emergency Worker, and the transfer of the child to the closest most appropriate hospital or medical facility. NOTE: This authorization does not cover major surgery unless the medical options of two other licensed Physicians or Dentists, concurring in necessity for such surgery, are obtained BEFORE the surgery IS PERFORMED.						
Participants Name: _____ <div style="text-align: center;">Please Print Name</div>		Parent/Guardian: _____ <div style="text-align: center;">Please Print Name</div>				
Date: _____		Parent/Guardian: _____ <div style="text-align: center;">Signature</div>				