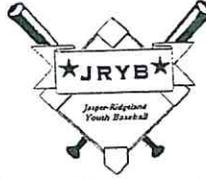


JASPER-RIDGELAND YOUTH BASEBALL
A Member Organization of Dixie Youth Baseball

A \$20 "Uniform Rush Fee" will be added to Registration Fee if player is registered after March 1st.



Sign-up locations:
JASPER CHAMBER OF COMMERCE
TOWN OF RIDGELAND

2020 Player Registration Form

Player Information (Please print and record name as it appears on birth certificate)

 First Name Middle Name Last Name Suffix SEX M / F

ADDRESS _____ CITY _____ ZIP _____

PHONE _____ BIRTHDATE (MO/DA/YR) _____

AGE _____ GRADE _____ MEDICAL INFORMATION _____

I am registering my child for the following league division (check one):

T-Ball (ages 5-6) * Softball (ages 9-12) ** Youth Baseball - Minors (ages 9-10)
 Machine Pitch (ages 7-8) Youth Baseball - Majors (ages 11-12)

ARE YOU WILLING TO COACH? – YES / NO

May 1 is the cutoff birth date for baseball. MUST HAVE BIRTH CERTIFICATE.

**T-Ball – Children turning 5 prior to December 31, 2020 are eligible.*

***Softball – Girls turning 13 on or after August 1, 2020 are eligible.*

Registration Fee of \$50.00 Paid by: () Check # _____ () Cash \$ _____ *Make check payable to JRYB.*

Shirt Size: (Check One) YS _____ YM _____ YL _____ AS _____ AM _____ AL _____ AXL _____

Do you have other children in JRYB? YES NO (please circle one) If so, which division(s)? _____
Does your child have a black baseball belt? YES NO

Father Information (or legal guardian)

Mother Information

NAME _____	NAME _____
ADDRESS _____	ADDRESS _____
CITY, STATE, ZIP _____	CITY, STATE, ZIP _____
PHONE (h) _____ (cell) _____	PHONE (h) _____ (cell) _____
EMAIL _____	EMAIL _____

I. In consideration of the 2020 season, I, Parent or Guardian, of the above named candidate for a position in above mentioned baseball or softball program, hereby give approval for his or her participation including transportation to and from activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless the parent or local league organization, the organizers, sponsors, supervisors, participants and persons transporting the boy/girl to and from activities, for any claim arising out of an injury to the boy/girl except to the extent and in the amount covered by accident and/or liability insurance held by the local league. I also grant permission to managing personnel or other league representatives to authorize medical care from any licensed physician, hospital, or medical clinic should the boy/girl become ill, when neither parent is available to grant authorization for emergency treatment. I agree to return upon request equipment issued to the boy/girl in as good a condition as when received except for normal wear and tear. I will furnish a certified birth certificate of the above named candidate upon request by league officials.

By signing below, I acknowledge that I have read and agree to Items I and II above.

X

 PARENT/GUARDIAN SIGNATURE

 DATE