



Strathcona County Baseball Association

2018 Program Registration Form

(each player needs their own registration form)



	Year Of Birth	Level	Nights Of Play	Registration
<input type="checkbox"/>	2011, 2012, 2013	Rally Cap	Tues. & Thurs.	\$125.00
<input type="checkbox"/>	2009, 2010	Rookie	Mon. & Wed.	\$190.00
<input type="checkbox"/>	2007, 2008	Mosquito	Tues. & Thurs.	\$225.00
<input type="checkbox"/>	2005, 2006	Pee Wee	Mon. & Wed.	\$240.00
<input type="checkbox"/>	2003, 2004	Bantam	Various Nights	\$265.00
<input type="checkbox"/>	2000, 2001, 2002	Midget	Various Nights	\$290.00

Fees

Registration Fee: \$ _____

Fundraising Fee: \$ 50 per player - will receive five \$10 Nitza's Pizza vouchers to sell

Volunteer Fee: \$ 25 per family - will be refunded if you attend the AGM

TOTAL \$ _____ paid by: ☐ cash ☐ cheque (# _____) ☐ EMT emt.scba@gmail.com
(pw: baseball)

There will be an additional \$75 fee for registrations received after March 13th 2018. No refunds will be issued after April 15th 2018.

Uniform Deposit

A cheque for \$100 post-dated for **August 1st 2018**.

Cheque # _____ will be destroyed when uniform is returned prior to August 1st 2018

T-Shirt Size: Youth - ☐ S ☐ M ☐ L ☐ XL Mens - ☐ S ☐ M ☐ L ☐ XL

Player Information

First Name: _____ Last Name: _____

Birthdate: _____ / _____ / _____ (mm/dd/yyyy) | ☐ Male ☐ Female | # of years played: _____

Players pitch from Mosquito - Midget. Are you interested? _____ Do you have experience? _____

Special Requests - only **one mutual player** request - will be considered at the discretion of SCBA

Coaches

Without volunteer coaches, we are unable to field teams no matter how many children are registered.

➤ The fundraising fee and the volunteer fee will be waived for Head Coaches

✦ **Are You Able To Help?** ☐ Head Coach ☐ Assistant Coach ☐ Other _____

Parent / Guardian Information

Mother's Name: _____ Phone (Primary): _____

Father's Name: _____ Phone (Alternate): _____

Address: _____ Email (Primary): _____

City: _____ Postal Code: _____

Photography & Video Consent

☐ Yes, I give SCBA permission to take and use my child's photograph and/or video images for inclusion in public information and promotional materials produced by Strathcona County Baseball Association.

Strathcona County Baseball Association (SCBA) reserves the right to cancel any or all programs due to insufficient registration. Further, SCBA reserves the right to transfer player registrations to another level offered to accommodate team members. The undersigned hereby forever releases and discharges the SCBA, its officers, volunteers and any other affiliated organizations of and from all actions suits, claims and demands which the undersigned may have arising out of the actions of SCBA and its programs.

Parent/Guardian Signature: _____ **Date:** _____ / _____ / _____