

## 2009 TYRA Registration

Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Circle:      Female      Male

(Baseball age as of May 1, 2009      Softball and T-ball age as of January 1, 2009)

League Age: \_\_\_\_\_

Age Group: \_\_\_\_\_

Shirt Size							
Youth				Adult			
S	M	L	XL	S	M	L	XL

<p>Which Sport?</p> <p>T-Ball</p> <p>Baseball</p> <p>Softball</p>
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Facts concerning the child's medical history including allergies, medications being taken & any physical impairment to which should be alerted: \_\_\_\_\_

\_\_\_\_\_

Parent(s) or Guardian(s): \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone 1: \_\_\_\_\_ Cell Phone 2: \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_

Relationship to player: \_\_\_\_\_

Home Phone : \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Doctor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone #: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_

**Medical Release:**

This is to certify that I, the parent and/or guardian of the above child, a participant in the Thornville Youth Recreations Association, hereby grant permission to the adult manager, coach, assistant coach of the team my child is on to obtain medical care from any licensed physician, hospital, or medical clinic, for the player named herein at such item as either parent or legal guardian cannot be contacted in person or by telephone. This authorization shall include all league activities, and we do hereby waive, release, absolve, indemnify and agree to hold harmless the Thornville Youth Recreations Association, The Village of Thornville, the organizers, coaches, supervisors, participants and persons transporting the players to and from those activities, for any claim arising out of an injury to the player.

**Waiver of Liability:**

I understand that participation of my child/children in the program is strictly voluntary and I freely choose to participate and I release TYRA, TYRA Officers, sponsors, and any other people officially connected with this program from any liability.

I give / do not give T.Y.R.A permission to post photos on the league website that my child is included in.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print the name you would like on your shirt: (not for T-ball) \_\_\_\_\_

Name(s) and Age(s) of **siblings** involved in TYRA: \_\_\_\_\_

<p>To be filled out by League Official only:      <input type="checkbox"/> Fee of \$ _____ pd. _____</p> <p>Forms handed out:</p> <p><input type="checkbox"/> Newsletter    <input type="checkbox"/> Parental Code of Conduct    <input type="checkbox"/> Parent/Player expectations    <input type="checkbox"/> Other: _____</p>
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