



**WILSONVILLE YOUTH SPORTS INC.
2008 BASEBALL REGISTRATION FORM**

Completed applications, along with registration fees should be sent to:
Wilsonville Youth Sports, Inc., PO Box 1155 (Registrar), Wilsonville, OR 97070

VOLUNTEER SUPPORT:

Wilsonville Youth Sports, Inc. needs your help. Please consider giving your time and expertise. Please check the box below if you are interested and someone will contact you.

Positions include assisting in preparing fields, game assistance, team mom/managers, coaching and many more. *Some volunteer positions require additional application.*

BASEBALL FEES:

CIRCLE FEE	<i>Before Feb 23</i>	<i>After Feb 23</i>
T-Ball	\$80	\$90
Rookies	\$95	\$105
Midgets	\$115	\$125
Juniors	\$125	\$135
Seniors	\$155	\$165
Additional donation In lieu of volunteer support		\$50

ON-LINE REGISTRATION IS ALSO AVAILABLE AT :

<http://www.leaguelineup.com/welcomeme.asp?url=wys>

Log on and sign up for a great season!

SENIOR FEDERAL PLAYERS: For players selected to play at the Senior Federal level, there will be an additional field usage fee in the amount of \$150.00 collected upon selection to the team.

UNIFORM FEES:

At the **Midget, Junior, and Senior** levels, the Baseball Committee decided players should purchase their uniforms. Registration fees have been reduced.

If your child is to play at one of these levels, please include \$60.00 to cover the cost of uniforms.

Jersey Size _____

Pant Size _____

PLAYER INFORMATION (one child per form):

Last Name: _____ First: _____ Grade in Spring 2008 _____
 Address/City/Zip _____
 Birthdate: _____ Gender: _____ Phone: _____
 School: _____ Years Played: _____

PARENT/LEGAL GUARDIAN INFORMATION:

Name #1 _____ Wk. Phone _____ Cell/Alt. Phone _____
 Address/City/Zip _____
 Name #2 _____ Wk. Phone _____ Cell/Alt. Phone _____
 Address/City/Zip _____
 Family e-mail address: _____
 Comments: _____

EMERGENCY INFORMATION:

Doctor _____ Phone _____ Dentist _____ Phone _____
 List any medical problems, prohibitions, or required medications your child may need: _____

Release, Waiver of Liability and Consent

I/We, the undersigned parents/legal guardians of _____, a minor, give my/our permission for his/her participation in Wilsonville Youth Sports, Inc. (WYS) activities. I/We acknowledge that these activities may be dangerous and result in serious injury and I/we hereby release WYS, its agents, coaches, directors, officers, and other representatives, from any liability and all claims for injury to persons or damage to property. I/We also agree to indemnify, defend and hold harmless the released parties from all claims by us, our dependent child, child's parent or guardian, or guest. I certify that the minor has been examined by a physician, he/she is in good health, and is able to participate in the activities. WYS its coaches or assistant coaches has my/our permission to call an ambulance to take my/our child to any available medical treatment or health practitioner. I/We authorize all diagnostic, medical and surgical treatment, at my/our expense. **I/we also agree to return any equipment and/or uniform supplied to my/our child within seven (7) days of the ending of the season or be charged a replacement fee.** I/We will also read the agreement for success and support the partnership between our child, our family and WYS and understand our child may not participate until that agreement has been signed and returned to WYS.

Signature: _____ Date: _____
 Parent/Legal Guardian

Read and Sign Registration Form

Wilsonville Youth Sports, Inc., PO Box 1155 (Registrar), Wilsonville, OR 97070
www.leaguelineup.com/wys
 503-638-3778

Questions? See the information sheet for the specific sport you are needing information on, visit us on the web, or call us.

Administrative Use Only:

Postmarked _____ Rec'd _____ MFD _____ AMT _____ SC _____ DB _____