

2010 REEDVILLE BASEBALL REGISTRATION

You may also register and pay on-line with Pay Pal after December 5, 2009: For details go to: www.reedvillebaseball.com Player Information: Please submit individual forms for each child.

Last Name _____ First Name _____ MI _____ Sex M – F
 Address _____
 City _____ State _____ Zip _____
 Contact Phone Number _____ Other Phone _____
 Birth Date _____ School Currently Attending _____ Current Grade in School _____
 If child is not currently attending School, please indicate the School attending in fall of 2010 _____
 Parent/Guardian _____ Employer _____
 Parent/Guardian _____ Employer _____
 E-mail Address _____

Reedville Baseball, Inc is a Non-Profit Organization that relies on parent involvement to succeed. Please take a moment to select a volunteer opportunity for the 2010 season:
 Coach Asst Coach Team Parent Concessions Sponsor Donations Field Maint.

League Information: Reedville Baseball participates in the Junior Baseball Organization. If a player misses tryouts or chooses not to participate, no makeup dates will be available. Players will be contacted after tryouts. All persons registered are guaranteed placement on a team. For more details please visit www.reedvillebaseball.com

Evaluations:

Midgets: [Saturday-03/06/2010] @ Century High School; call back evaluations on [Sunday-03/07/2010]

JR/SR: [Saturday-02/27/2010] @ Century High School; JR call back evaluations on [Sunday-02/28/2010]

Clinics: Century Baseball Clinic (02/14/2010) & TBA @ The Yard Baseball Academy

Evaluation and clinic dates are subject to change, visit www.reedvillebaseball.com for the most up to date information.

League	Age Group As Of 08/01/2010	Early Registration Postmarked Before 02/01/2010	Regular Registration Deadline Post Marked 03/01/2010	Non-Participation Of Fundraiser (Optional-See Note 3 Below)	Total Fee Paid
Pee Wee	5-6	[] \$60.00	[] \$65.00	[] \$50.00	
Rookies	7-8	[] \$70.00	[] \$80.00	[] \$50.00	
Midgets	9-10	[] \$120.00	[] \$130.00	[] \$50.00	
Juniors	11-12	[] \$150.00	[] \$160.00	[] \$50.00	
Seniors	13-14	[] \$175.00	[] \$185.00	[] \$50.00	

Note 1: Any registration received after 03/15/2010 is subject to an additional late fee

Note 2: Please select correct age group [08/01/2010] – being incorrect will only delay processing your registration

Note 3: If you have not checked the box “Non-Participation of Fundraiser”, you will be required to sell or buy at least one complete book of raffle tickets

Note 4: If you select “Non-Participation of Fundraiser” please include the \$50 with your payment

PEE WEE’S AND ROOKIES ONLY:

Coach Request _____ Player Request _____

(Every reasonable attempt will be made to honor your request but there will not be a guarantee)

CONSENT FOR ANOTHER TO TREAT YOUR CHILD

I, _____, the parent/guardian of _____ hereby authorize Reedville Baseball, Inc. through its directed representatives (Officers, Directors, Coaches, etc) who are 18 yrs or older, to consent to any medical treatment of the above child. No medical assistance will be provided without authorization.

Health Insurance Company: _____ Policy: _____

Family Physician: _____ Phone: _____

Dentist: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Allergies/ Medications: _____

Parent/Guardian Signature: _____

Mail completed registration form, medical release, copy of birth certificate and check/money order to:

**REEDVILLE BASEBALL INC.
ATTN: 2010 REGISTRATION
PO BOX 5932
ALOHA, OR 97006**

A copy of a Birth Certificate (**NO ORIGINALS**) is required if this is a player's first year with Reedville Baseball or if one has not been provided in the last three (3) years. Forms without proper fees paid or a Parent/Guardian signature will not be processed.

RETURN CHECK POLICY (Please Read Carefully):

A \$30.00 service fee will be assessed on all returned checks.

REFUND POLICY (Please Read Carefully):

Every refund is subject to a \$25 non-refundable portion of the registration fee. Refund requests must be in writing prior to tryouts (this would be 03/05/2010 for Midgets AND 02/26/2010 for Juniors/Seniors). Refund requests will not be honored after the above dates per appropriate league.

For Office Use Only

Date Received _____

League Fee _____

Fund Raising Fee _____

Amt Received _____

Check # _____

Paid by Pay Pal _____

Rec'd By _____

Birth Cert _____