

2014 HYAL Fall BASEBALL / SOFTBALL Player Registration Form

League Age _____

Amount _____

Payment Cash Check # _____

Player Information:

| | | | | | | |
|--------------|--------------|-------------|--|---------|---|--|
| (First Name) | | (Last Name) | | | Male <input type="checkbox"/> Female <input type="checkbox"/> | |
| (Birthdate) | (Home Phone) | | (Shirt Size) Youth: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large Adult: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> XX-Large | | | |
| (Address) | | | (City) | (State) | (Zip) | |

Current School and Grade

| | |
|----------|---------|
| (School) | (Grade) |
|----------|---------|

Parent/Guardian #1

Parent/Guardian#2

| | | | |
|--------------|--------------|--------------|--------------|
| (First Name) | (Last Name) | (First Name) | (Last Name) |
| (Home Phone) | (Cell Phone) | (Home Phone) | (Cell Phone) |
| E-mail | | E-mail | |

| | |
|-------------------------------|----------------------------|
| League ages 4-5 | \$50 for one child |
| League ages 6-12 | \$85 for one child |
| League ages 13- and up | \$100 for one child |

A separate \$100 work duty deposit is required.

There are no raffle tickets for Fall Ball

Notations:

1. We will issue no refunds after August 1, 2014. If you register after August 1, 2014 then all fees are non-refundable
2. There will be a \$35 fee for any returned or cancelled check.
3. Any and all requests for players to be on a specific Coaches team, with other players for carpooling purposes, or any other reason is NOT guaranteed to be accommodated. The HYAL reserves the right to create balanced teams and in many instances may need to deny such requests. Ages 8 and up are based on Drafts.

Parent/Guardian has given the above names to participate in H.Y.A.L. for the season and sport listed. H.Y.A.L. is not responsible for charges incurred as a result of injuries sustained in League play or participating beyond the limits of its insurance.

Parent or Guardian signature: _____ Date: _____