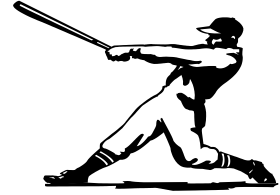




# 2010 Brockville & District Baseball Association Registration Form



Players Last Name:
Player's First Name:
Date of Birth:
Street Address:
Postal Code:
City/Town/Village/Township
Home Phone Number:
Work Phone Number:
E-Mail:
Mothers Name:
Fathers Name:
Allergies:
Please Select which level of play you are interested in :  <div style="display: flex; justify-content: space-around; align-items: center;"> <span><b>House League:</b> <input type="checkbox"/></span> <span><b>Rep :</b> <input type="checkbox"/></span> </div> <p style="text-align: right; margin-top: 5px;">Coaches will contact you with tryout dates</p>
If you are willing to assist with our baseball program, please list the area(s) in which you would like to help:  Name(s):  Area(s):

Signature of Parent or Guardian

Date

\_\_\_\_\_

\_\_\_\_\_

Paid:

Amnt :

# Brockville District Baseball Association

## Registration Form 2010 Season

Please have the following documents with your registration:

<input type="checkbox"/> Fee Payment (no post dated cheques)	<input type="checkbox"/> Registration form
<input type="checkbox"/> Completed consent form (below)	<input type="checkbox"/> Completed Bingo selection form (below)

<p><b>Brockville and District Baseball Association</b>  <u>Consent Form</u>  <u>Freedom of Information and Protection of Privacy Act</u></p> <p><i>Publications, Displays, Photographs, Films, Videotapes, Achievements, Awards Participation</i></p>	
<p><b>I,</b> _____  <i>(Parent/Guardian Name) PLEASE PRINT</i></p> <p style="text-align: center;"><b>the parent/guardian of</b></p> <p>_____</p> <p style="text-align: center;">(Player's name, 1)</p> <p>_____</p> <p style="text-align: center;">(Player's name, 2)</p> <p>_____</p> <p style="text-align: center;">(Player's name, 3)</p> <p>_____</p>	<p><input type="checkbox"/> <b>PERMIT</b> the Brockville District Baseball Association to display photographs, video images, articles or publications involving my child/children, including name, which may be the subject of interest in local, regional or national media.</p> <p><input type="checkbox"/> <b>DO NOT</b> permit the Brockville District Baseball Association to display, photographs, video images, articles or publications involving my child/children, including name, being the subject of interest in local, regional or national media.</p> <p>_____</p> <p><i>(Signature of parent/guardian of player if 18 or more years of age)</i></p> <p style="text-align: center;">_____</p> <p style="text-align: center;"><i>(Date)</i></p>