



Pottsboro Youth Association 2012 Baseball Registration

PYA Use Only	
Age Group	Payment Method
__ 5-6	\$ _____
__ 7-8	__ Cash
__ 9-10	__ Check # _____
__ 11-12	__ Scholarship
__ 13-14	

Player's Name _____ Date of Birth _____

Address: _____ Grade: _____

City _____ State _____ Zip Code _____

Parent's (Guardian's) Name: _____

Phone # (home): _____ Work: _____ Cell: _____

Email Address: _____

Family Hospitalization Insurance: _____ Family Doctor: _____

List any allergies, medical conditions, health concerns, or concerns that affect the child:

Jersey Size: YM YL AS AM AL AXL AXXL

I am willing to volunteer for the following:

- Coach
- Assistant Coach
- Scorekeeper
- Concession
- Cleanup
- Grounds
- Umpire
- Other (list on back)

Parent/Guardian's Agreement & Authorization:

By my signature below, I confirm that the above is true to the best of my knowledge. Futhermore, I agree to encourage my child to use good sportsmanship and I agree to show goo sportsmanlike conduct as a fan or volunteer. I also give permission to the PYA to give the above phone numbers to coaches, assistant coaches, players, and parents of players. Finally, by my signature below, I confirm that my child has permission to play in the above sport, and I also confirm that I am the parent, guardian, or managing conservator with the authority to authorize the child's participation in the above sport.

In case of emergency, I hereby authorize a representative of Pottsboro Youth Association to seek medical attention for my child.

Parent/Guardian Signature: _____ Date: _____

Amateur Athletic Minor Waiver and Release of Liability
(Please Read Before Signing)

In consideration of being allowed to participate in any way Pottsboro Youth Association, Inc. athletic/sports program and related events and activities, the undersigned:

1. Agrees that the parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
2. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concerns in my child's readiness for participation and/or in the program itself, I will remove my child from participation and bring such attention of the nearest official immediately; and,
3. I, for myself, spouse, and child ACKNOWLEDGE AND FULLY UNDERSTAND that each participant will be engaging in ACTIVITIES THAT INVOLVE RISK OF INJURY, INCLUDING PERMANENT DISABILITY AND DEATH, and severe social and economic losses which might result not only from their own actions, inactions of negligence, but the action, inaction or negligence of other, the rules of plan, or the condition of the premises or of any equipment used. Further, that there may be risks not known to us or not reasonably foreseeable at this time.
4. I, for myself, spouse, and child ASSUME ALL THE FOREGOING RISK AND ACCEPT PERSONAL RESPONSIBILITY FOR THE DAMAGES following such injury, permanent disability or death.
5. I, for myself, spouse, and child RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE, Pottsboro Youth Association, Inc. its affiliated clubs, and associations there respective administrators, directors, officers, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, hereinafter referred as "releases", from any and all liability to each of the undersigned, his or her heirs and next of kin for any and ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES ON ACCOUNT OF INJURY, INCLUDING DEATH OR DAMAGE TO PROPERTY, CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
6. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representative and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above releases from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.
7. I, for myself, my spouse, and child, and on behalf of my/our heirs, assigns, personal representatives and next of kin HEREBY AGREE to resolve any disputes with athletes, coaches, managers, league officials, administrators, directors, officers, volunteers, participants of the Pottsboro Youth Association, Inc., and their heirs, successors and assigns that cannot first be resolved through the procedures of the Pottsboro Youth Association, Inc. or any league or sports association that the participant is participating in, through mediation.

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Parent or Guardian (Signature & Relationship)

Date

Printed Name of Parent or Guardian

Printed Name of Participant