

"2012" REGISTRATION FORM

PONY DIVISION ONLY

(PLEASE PRINT)

OFFICE	USE
<input type="checkbox"/>	DBF File
<input type="checkbox"/>	Roster
<input type="checkbox"/>	Financial

Name: _____ Age: _____ Date of Birth: ___/___/___
 Address: _____ City: _____ Zip: _____
 Home Phone: (____) _____ Alt. Phone: (____) _____
 E-Mail: _____
 Team 11 _____ League _____ School: _____ Grade: _____
 Jersey - Adult Size: S M L XL XXL PANTS: * Players Responsibility and MUST
 be a **SOLID GRAY BELTED** pant!

2012 EUCLID PONY BASEBALL LEAGUE - PARTICIPATION FEES

* PLEASE MAKE ALL CHECKS/MONEY ORDERS PAYABLE TO: EUCLID PONY BASEBALL *

RESIDENT FEE: \$100.00 NON-RESIDENT FEE: \$125.00

Date League Fee Paid: ___/___/2012 Cash Check M.O. # _____

- * ALL CONTRACTS and LEAGUE FEE'S MUST BE TURNED INTO THE LEAGUE OFFICE BY MAY 1, 2012 *
- * UNIFORMS WILL NOT BE ISSUED WITHOUT A COMPLETED CONTRACT AND LEAGUE FEE PAID IN FULL *
- * YOUR Insurance provider will be considered the "PRIMARY" provider *
- * LEAGUE Insurance will be considered as the "SECONDARY" provider ONLY *

* EUCLID PONY BASEBALL LEAGUE - REFUND POLICY *

* THERE WILL BE NO REFUNDS ISSUED AFTER MAY 1, 2012 *

* If you are chosen to play on YOUR High School Summer Team a refund may be considered (proof provided) *

League Rules Received:
 League Sched. Received:

* ALL JERSEYS AND BELTS ARE THE PROPERTY OF THE
 EUCLID PONY BASEBALL ORGANIZATION AND
 MUST BE RETURNED AT THE COMPLETION OF
 YOUR SUMMER SEASON *

* IF YOU DAMAGE OR LOOSE ANY UNIFORM COMPONENT YOU WILL BE CHARGED FOR THE REPLACEMENT *

* COMMENTS *

Players Signature

Parent or Guardians Signature

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Euclid Pony Baseball - Liability Release

By my participation in Euclid Pony Baseball, I, the undersigned for myself and my heirs, personal representatives, successors, and assigns, hereby release and hold harmless the Euclid Pony Baseball Organization and the City of Euclid and it's Parks and Recreation Department from all claims and rights of action of any kind which may now have or which may accrue, arising out of my participation in said sponsored activities, Summer Baseball, or arising out of the use of City or Parks and Recreation premises or equipment or property of any kind or nature. I hereby release and hold harmless the Euclid Pony Baseball Organization, Its Officers and The City Of Euclid and its Parks and Recreation Department for personal injuries, property damage, and any other losses incurred as a result of my participation in Euclid Pony Baseball or arising out of the use of City or Parks and Recreation premises or equipment or property of any kind or nature, including injuries, damage and any losses which are presently known as well as those which are unknown but which may develop or be discovered in the future. I agree to assume any and all risks inherent in the above and for the above-mentioned using any and all properties within the City of Euclid.

Participants Name (please print) _____

Parent or Guardian(s) Signature _____

Date: ____ / ____ / ____

During the normal events of the **Euclid Pony Baseball League**, Members of the League Or their Representative will be photographing and video/audio tape recording of the activities of Practices, Regular & Post Season Games and League activities. By the authorized signature on the front of the **Player Contract** you authorize the player to be recorded without limitation, and assign all rights to the **Euclid Pony Baseball League** and/or Representative for Broadcast, Cablecast, Internet Posting, or other purpose without limitation for the purposes of the **Euclid Pony Baseball League**. To **OPT OUT** of this authorization, please check the line below, sign and date.

SIGN ONLY IF YOU *DO NOT* AUTHORIZE THE PHOTOGRAPHY OR RECORDING OF THE PLAYER WHOSE NAME APPEARS ON THIS CONTRACT.

____ I withdraw the authorization for recording

Parent or Guardian(s) Signature _____

Date _____ / _____ / _____