

2017 Reedville Baseball Registration

You may also register and pay on-line starting December 5, 2016. 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 _____ Other Phone _____

Birth Date _____ School Currently Attending _____

Current Grade in School _____

If child is not currently attending School, please indicate the School attended in spring of 2016 _____

Parent/Guardian _____ Employer _____

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E-mail Address (required) _____

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 2017 season:

Coach Asst Coach Team Parent Concessions Sponsor Donations
 Field Maint.

League Information: Reedville Baseball participates in the Junior Baseball Organization. If a player at the midget, junior, or senior level misses evaluations or chooses not to participate, no makeup dates will be available. Players will be

contacted after evaluations. All players registered are guaranteed placement on a team. For more details please visit: www.ReedvilleBaseball.com

2017 Evaluations:

Midget/JR/SR: [March 4th and March 5th*, 2017] @ Century High School

*if needed

For details on times and other requirements, visit the [evaluations page](#) on the Reedville Web site.

Clinics:

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

League Fees

Level	Grade as of Fall 2016	Registration Fee marked by 2/1/2017	Registration Fee marked after 2/1/2017	Opt-out fee for fundraiser (see note below)	Total Fees Paid
Pee-Wee	Pre-K-K	[] \$65.00	[] \$65.00	[] \$80.00	
Rookie	1-2	[] \$80.00	[] \$80.00	[] \$80.00	
Midget	3-4	[] \$160.00	[] \$180.00	[] \$80.00	
Junior	5-6	[] \$200.00	[] \$220.00	[] \$80.00	
Senior	7-8	[] \$240.00	[] \$260.00	[] \$80.00	

Note 1: Please select correct grade your child is in as of Fall 2016– being incorrect will only delay processing your registration

Note 2: If you have not checked the box “Opt-out fee for Fundraiser”, you will be required to sell one box (60 count) of candy bars as part of the annual candy Bar Fundraiser

Note 3: If you select “Opt-out fee for fundraiser” please include the \$80 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: 2017 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 (email is acceptable) prior to evaluations (3/4/17). Refund requests will not be honored after the above dates per appropriate league.

PHOTO WAIVER (Please Read Carefully):

I grant to Reedville Baseball Inc. and its members the right to take photographs, videos, or other digital media of my child in connection with Reedville Baseball.

I authorize Reedville Baseball Inc. use and publish the same in print and/or electronically. I agree that Reedville Baseball may use such digital media of my child with or without their name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, Web content, and social media (e.g., Facebook).

For Office Use Only
Date Received _____
League Fee _____
Fund Raising Fee _____
Amt Received _____
Check # _____
Paid by Pay Pal _____
Rec'd By _____
Birth Cert _____