

NEWT GUILBAULT COMMUNITY LEAGUE, INC.

Would Your Child Be Interested in Playing Tournament Ball?

Yes

LEAGUE AGE _____ TEAM _____

BIRTH DATE _____ BIRTHPLACE _____
month, day, year city state

NAME _____

PHONE # _____ E-MAIL _____

ADDRESS _____
street city state

I, We, the parent (s) or guardian (s) of the above named child, who is a candidate for a position on a Newt Guilbault Community League, Inc. baseball team, hereby give permission for his/her participation in any and all of the League or team activities including, but not limited to, tryouts, meetings, practices, scrimmages, games, playoffs, picnics, trips, clinics, interleague games and scrimmages and fund raisers.

I, We, do in consideration of his/her candidacy, hereby further release, absolve, indemnify and hold harmless the Newt Guilbault Community League, Inc, its organizers, officers, directors, sponsors, managers, coaches, appointed supervisors, score keepers and umpires, and all of them and their successors regarding (any and all claims or causes of actions arising from any of the above referred to activities or transportation thereto. I, We, also waive any claim or cause of action arising as a result of transportation provided for the above referred to activities to the extent not covered by insurance.

I, We, agree to provide a certified birth record or other documentation regarding the above named child upon request of League officials.

Executed freely and voluntarily this _____ day of _____ 2020

Parent or Guardian

Parent or Guardian

[] I am interested and available to assist the League by participating in one or more of the following: coaching, score keeping, fundraising activities, supervision, field or building maintenance, etc.