**Village of Millerton/ Town of North East**

**Baseball Registration**

Please complete one form for each child. Indicate below in which section your child will play.

**Ages as of April 1, 2017**

\_\_\_\_T-Ball (ages 5-6) \_\_\_\_ Minors (ages 7-8) \_\_\_\_ Majors (ages 9-12)\_\_\_\_LL (ages 9-12)

Shirt size: (circle one) Youth Small Medium Large X-Large

 Adult Small Medium Large X-Large

Name of Child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age:\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact Name & Phone#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_has my permission to participate in the Millerton baseball program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian Date

\*\*Please indicate how you are able to volunteer by circling how you can help.

(Without Volunteers this program will not be offered.)

**Head Coach Assistant Coach Umpire Field Preparation**

**Send forms and fees to: Amber Jordan**

 **21 Dutchess Avenue**

 **PO Box 528**

 **Millerton, NY 12546**

 **845-849-4757**

 **Email:** amberjordan78@gmail.com

**Fee: $30.00**

**Please make checks payable to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**