JEFFERSON DIXIE YOUTH -REGISTRATION

PLEASE PRINT

The name below will be as it appears on the individual's trophy, etc.

Players Full I	Birth Name: First:		Mic	idle:		Last:			
Male:						<u></u>			
				Age:		Telephone:_			
					-	· _			
Parent/Guardian: School Child					Attends:				
I, parent or gi	uardian of the named	participant/pla	yer on this d	ocument, her	reby give app	proval to his/her	participation	in	
any and all lead	uge activities during th	e current sea	son. I assume	e all hazards	incidental to	such participati	on including		
transportation t	o and from the activiti	es; and do he	reby waive, re	elease, abso	lve, indemnit	fy and agree to I	nold harmless	s the	
parent or local	league organization, t	he organizers	, sponsors, si	upervisors, p	articpants ar	nd person transp	orting the bo	y/	
girl to and from	activies, for any claim	ı arising out o	f injury to the	participant,	except and ir	n the amount co	vered by acci	dent	
and or liability is	nsurance held by the	ocal league.					•		
I also grant permission to managing personnel or league representatvies to authorize and obtain medical care from any									
licensed physician, hospital or medical clinic should the participant become ill or injured while participating in league									
activities away from home, or at other times when neither parent is available to grant authorization for emergency treatment.									
I will furnish a certified birth certificate of the named participant upon request by league officals.									
I, parent/guardian also agree to abide by Jefferson Dixie Youth's Code of Ethics which I have read and have a copy of.									
I understand that not abiding by the Code of Ethics could result in I, as a parent/guardian, not being allowed to the games or									
practices of my child. REGISTRATION FEES ARE NON-REFUNDABLE									
ALGISTATION I LES AND MOIN-NET GIADABLE									
Signature of parent/guardian Relationship Date									-
A	Playlı	ng Age	Ą	GE AS OF JAN	IST				
BASEBALL					SC	OFTBALL (Girls o	only)		
Age	Division	Amount		•	Age	Division	Amount		
3 to 4	Wee Ball	\$55.00			5 to 6	Dixle Swee Tee	\$65.00		
5 to 6	A-Tee Ball	\$65.00			7 to 8	Dixie Darlings	\$65.00		
7 to 8	AA-Coach Pitch	\$65.00			9 to 10	Dixie Angels	\$65.00		
9 to 10	AAA-Minor League	\$65.00			11 to 12	DixiePonytails	\$65.00		
11 to 12	0-Zone	\$65.00			13 to 15	Dixie Belles	\$65.00		
13 to 14	Dixle Boys	\$65.00			(white property of the second of the second of	Dixie Debs	\$65.00		
Player : Shirt Size: (Circle One):					Additional Player Shirt (\$12.00)				
Youth: XS S M L XL Adult S M L			L XL XXL		Size:		QTY:		
Player: Pant Size: (Circle One):			ı vı vvı		Player: Hat (S		Additional Pla		
Youth: XS S M L XL Adult: S M I NOTE: BASEBALL / SOFTBALL WILL ONLY RECEIVE ONE PAIR OF				UP ENTINE OF A	Adult	or Youth	Size:	Qty:	
	SOFTBALL WILL ONLY REC BALL / SOFTBALL PANTS: \$			HE ENTIKE SEA:	SUN				
	ORDER: (SHIRT-HAT		ut Quantity o	f itom in anni	opriste boy	halow)			
The organic practice volcada aparts will be Andreid	Ange Constant Market Control and Angel Control and Angel Control and Control a	Shirt Size:	S-\$12.00	M- \$12.00	L-\$12.00	XL-\$12.00	XXL-\$14.00	XXXL-\$16.00	HAT- \$20.00
(Money due at registration) Shirt Size: PARENT SHIRTS: QTY:		0 412.00	HI- WILLOU	E-\$12.00	ΛΕ-Ψ12.00	70, ζψ14,00	7000E-\$10.00	1)M1* \$20.00	
PLEASE FILL OUT YEARS PLAYED									
Yrs played Wee Ball:			Yrs played "O" Zone:				Yrs played Angels :		
Yrs played Tee Ball:			Yrs played Allstars:				Yrs played Ponytails:		
Yrs played Coach Pitch:			Yrs played SweeTees:				Yrs played Belles:		
Yrs played Minor League:			Yrs played Darlings:				Yrs played Allstars:		

Minor Waiver/Release

RELEASE OF LIABILITY FOR MINOR PARTICIPANTS

READ BEFORE SIGNING

IN CONSIDERATION OF Name Of Minor Child/Ward participate in any way i activities, the Legal Name Of Your Sports Program, and agrees that:	, my child/ward, being allowed to n the <u>JEFFERSON DIXIE YOUTH</u> related events and Ex: League Name undersigned acknowledges, appreciates
The risk of injury to my child from the activities invo potential for permanent disability and death, and whi reduce this risk, the risk of serious injury does exist;	ile particular rules, equipment, and personal discipline may
RISKS, both known and unknown, EVEN IF RELEASES or others, and assume full response. 2. I willingly agree to comply with the program participation. If I observe any unusual significand/or in the program itself, I will remove my the nearest official immediately; and, 3. I myself, my spouse, my child, and on behalf of kin, HEREBY RELEASE AND HOLD HA (Legal Name Of Your Sports Program, Ex: Lemployees, volunteers, other participants, spoowners and lessors of premises used to condu AND ALL INJURY, DISABILITY, DEATH child's involvement or participation in these programs in the program of kin, HEREBY INDEMNIFY AND He all liabilities incident to my involvement or participation or participation of kin, HEREBY INDEMNIFY AND He all liabilities incident to my involvement or participation or participation.	eant concern in my child's readiness for participation of child from the participation and bring such attention of of my/our heirs, assigns, personal representatives and next arms. JEFFERSON DIXIE YOUTH seague Name) its directors, officers, officials, agents, pasoring agencies, sponsors, advertisers, and if applicable, of the event ("Releasees"), WITH RESPECT TO ANY or loss or damage to person or property incident to my programs, WHETHER ARISING FROM THE OTHERWISE, to the fullest extent permitted by law, half of my/our heirs, assigns, personal representatives and OLD HARMLESS all the above Releasees from any and articipation in these programs, EVEN IF ARISING FROM DETMINISTRATION OF RISK AGREEMENT, CAND THAT I HAVE GIVEN UP SUBSTANTIAL.
PARENT/GUARDIAN SIGNATURE)	(PRINT NAME)
Date Signed:	
UNDERSTANDING OR RISK I understand the ser program, my personal responsibilities for adhering to	iousness of the risks involved in participating in this rules and regulation, and accept them as a participant.
PARTICIPANT SIGNATURE)	(PRINT NAME)