

WHITESBORO P.A.R.D. YOUTH BASEBALL/SOFTBALL

REGISTRATION DEADLINE – FRIDAY, FEBRUARY 12TH, 2010 AT 5:00PM

REGISTRATION FEE: 5 - 6 YR. OLDS = \$ 40.00 / 7 - 15 YR. OLDS = \$ 55.00 / LATE FEE = \$ 10.00

FAMILY DISCOUNT: 2 CHILDREN - \$ 5.00 OFF TOTAL FEE / 3 OR MORE CHILDREN - \$ 10.00 OFF TOTAL FEE
LATE REGISTRATIONS TAKEN ONLY IF NEEDED

CALL P.A.R.D. ABOUT SCHOLARSHIP AVAILABILITY & PAYMENT PLANS IF NEEDED (564-5964)

SEND COMPLETED FORM, FEE AND COPY OF BIRTH CERTIFICATE TO PO BOX 340, WHITESBORO, TX 76273

OR BRING TO P.A.R.D. AT 400 N. WILSON, 9am –5pm, MONDAY – FRIDAY

ANYONE INTERESTED IN MOVING THEIR CHILD UP IN AGE GROUP OR STARTING EARLY, NEEDS TO CALL DARE AT 903-564-5964 BEFORE YOU TURN YOUR FORM IN

***** ALL GIRLS GAMES WILL BE IN SHERMAN /9-10 & 11-12 BOYS MAY HAVE SOME OR ALL GAMES IN SHERMAN *****

AGE DIVISION DETERMINED BY AGE ON OR BEFORE... **!!! APRIL 30TH FOR BOYS & JAN. 1ST FOR GIRLS !!!**

LEAGUE AGE DIVISION THIS SEASON: (CIRCLE ONE) 5-6 / 7-8 / 9-10 / 11-12 / 13-15(GIRLS ONLY)

(PLAYER'S LEGAL NAME) LAST NAME _____ FIRST _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ PHONE _____

DATE OF BIRTH—MONTH _____ DAY _____ YEAR _____ MALE/FEMALE _____

SCHOOL _____ GRADE _____

FATHER'S NAME _____ OCCUPATION _____

FATHER'S DAY PHONE _____ EMAIL _____

MOTHER'S NAME _____ OCCUPATION _____

MOTHER'S DAY PHONE _____ EMAIL _____

MEDICAL PROBLEMS OF PLAYER _____

DOCTOR TO NOTIFY IN EMERGENCY _____ PHONE _____

PERSON TO NOTIFY IN EMERGENCY(NOT PARENTS) _____ PHONE _____

SHIRT SIZE – CIRCLE ONE YS 6-8 / YM 10-12 / YL 14-16 / AS / AM / AL / AXL / AXXL

LIABILITY WAIVER AND CONSENT FOR MEDICAL TREATMENT

I, HEREBY GIVE MY APPROVAL FOR THE ABOVE-NAMED TO PARTICIPATE IN THE PARD YOUTH SPORTS PROGRAM. I ASSUME ALL RISK AND DO HEREBY WAIVE, RELEASE AND AGREE NOT TO HOLD THE CITY OF WHITESBORO, THE PARD, THE ORGANIZERS, SPONSORS, SUPERVISORS, PARTICIPAN PERSONS TRANSPORTING MY CHILD RESPONSIBLE FOR ANY INJURY THAT MAY BE INCURRED WHILE PARTICIPATING IN THE PROGRAM. AS THE PARE LEGAL GUARDIAN OF THE ABOVE-NAMED PLAYER, I HEREBY GIVE CONSENT FOR EMERGENCY MEDICAL CARE PRESCRIBED BY A DULY LICENSED DC OF MEDICINE OR DENTISTRY. THIS CARE MAY BE GIVEN UNDER WHATEVER CONDITIONS ARE NECESSARY TO PRESERVE THE LIFE, LIMB OR WELL-BE MY DEPENDENT. I DO HEREBY FULLY ANDFREELY CONSENT TO THE USE OF THE PARTICIPANTS PHOTO FOR PROMOTIONAL PURPOSES ON BOTH PRIN1 MATERIALS AND WEBSITES. I DO HEREBY RELEASE AND HOLD HARMLESS THE CITY OF WHITESBORO FROM A LIABILTY ARISING OUT OF SAID PARTIC IN A PUBLICATION, ADVERTISEMENT, AND OR PROMATION.

SIGNATURE OF PARENT/GUARDIAN _____

ARE YOU INTERESTED IN BEING A HEAD COACH (CIRCLE ONE) YES / NO

SIBLINGS PLAYING IN LEAGUE(NAME & AGE) _____

-----CUT OFF AND KEEP-----CUT OFF AND KEEP-----

SCOUT DAY SATURDAY, FEBUARY 20TH AT WHITECORRON PARK(RAIN-OUT DATE = 2-27-10)

ALL PLAYERS SHOULD TRY TO BE PRESENT AT SCOUT DAY TO BE PLACED IN THE COACHES DRAFT. IF NOT PRESENT YOU MAY BE PLACED IN A HAT PICK DRAW. ALL PLAYERS WILL BE PLACED ON A TEAM.

SCOUT DAY SCHEDULE

W'BORO 7-8 GIRLS AT 9:00AM
W'BORO 11-12 GIRLS AT 10:00AM
W'BORO 7-8 BOYS AT 12:00PM
W'BORO 9-10 BOYS AT 1:15PM
W'BORO 11-12 BOYS AT 2:30PM
C'VILLE 13-15 GIRLS AT 3:45PM
C'VILLE 9-10 GIRLS AT 4:30PM

W'BORO 9-10 GIRLS AT 9:30AM
W'BORO 13-15 GIRLS AT 10:30AM
C'VILLE 7-8 BOYS AT 12:45PM
C'VILLE 9-10 BOYS AT 2:00PM
C'VILLE 11-12 BOYS AT 3:15PM
C'VILLE 11-12 GIRLS AT 4:15PM
C'VILLE 7-8 GIRLS AT 5:00PM

IF YOU ARE NOT SURE ABOUT YOUR CORRECT AGE GROUP OR SCOUT TIME, PLEASE CALL 564-5964