

**REGISTRATION FORM - MARION COUNTY YOUTH
BASEBALL / SOFTBALL / TEEBALL PROGRAM**

Spring 2023
Registration fee: \$65
Registration from Jan 16th until Feb 16th.

PLAYER INFORMATION

NAME: _____
First Last

Male Female

AGE(as of Sept. 1st): _____ DATE OF BIRTH: _____
MM/DD/YYYY

MAILING ADDRESS: _____

We will assign teams based on final registration results.
Team age requirements are based on age as of September 1st
(Dixie Youth Organization guidelines).

UNIFORMS

The registration fee covers the cost of a shirt, hat, socks, and pants or shorts.
Each player should bring his/her own glove, cleats, bat & helmet.

Please choose youth or adult sizes

SHIRT SIZE: YXS YS YM YL YXL
 AXS AS AM AL AXL

PREFERRED PLAYER #: _____ ALTERNATE #: _____

PANTS/
SHORTS SIZE:

YXS YS YM YL YXL
 AXS AS AM AL AXL

CONCESSION STAND NOTICE

Our team concession stand is our primary fundraiser and covers the cost of umpires for home games and team supplies. One adult from each family will be asked to work at least one shift in the concession stand. Thank you for your cooperation.



COVID-19 NOTICE

At any point in time that your child becomes ill,
please keep them home.

PLAYER MEDICAL INFORMATION

ALLERGIES: _____

ILLNESSES UNDER MEDICAL CARE: _____

FAMILY PHYSICIAN: _____

HOSPITAL OF CHOICE: _____
(Insurance Requirement)

If a child is injured prior to or during the season and has to be seen by a physician, the child will not be allowed to play until released by a physician in the form of a doctor's note stating the child can resume physical activity.

ADDITIONAL CONTACT

Name: _____

Relationship: _____

Contact #: _____

TOTAL AMOUNT DUE

Total: _____

Check # _____ CASH

PARENT OR LEGAL GUARDIAN INFORMATION

Coaches and Recreation Department members will be the only ones who get this information in order to communicate with you regarding practice or games.

Name: _____ Relationship: _____ Email: _____

PHONE # :(HOME) _____ (WORK) _____ (CELL) _____

Parent or Guardian, please read and sign below:

I, the undersigned, as parent or legal guardian of the above mentioned minor child, shall indemnify and say harmless Marion County and/or the coaches and/or support personnel, including all court costs and attorney fees and judgment against Marion County and/or coaches and/or support personnel against all loss, costs and damages on account of injuries to the person of said child while in the use of Marion County Recreational Facilities located in Marion County. This includes at any other place where any activity is taking place where said minor is participating or involved, but not limited to while said minor child is participating in activity away from Marion County in a field or facility of another adversary team or player.

PARENT OR LEGAL GUARDIAN SIGNATURE: _____