

Lake Area USSSA Youth Baseball

2007 Player Registration Form
 PO Box 6632 - Lake Charles, LA 70606
 Web Site - www.LakeAreaBaseball.com
 E-mail - info@lakeareabaseball.com
 337-479-0855

God Bless America!!!

Submit All of the Following Items:
 1) Completed Form
 2) Copy of Birth Certificate
 3) Registration Fee

Make Checks Payable to Lake Area USSSA
 Registration - \$60 (Mail in) \$55 (Online)
 Deadline February 26

SUBMIT ALL THREE ITEMS:
 Mail to the Address to Left or
 Submit at Nelson Road Ball Park
 Saturday February 24 & March 3, 9am -12noon

Players Last Name		First Name		Mi	
Mailing Address			City	ST	Zip
Mother or Guardian's Name		E-Mail Address		Home Phone	Work Phone
Father or Guardian's Name		E-Mail Address		Home Phone	Work Phone
Date of Birth / /	Circle Players Shirt Size Youth - S, M, L Adult - S, M, L, XL, 2XL		Circle One 1) Returning Player 2) New Player		If Returning - Last Year Team Name:

*** Please Check the Appropriate Age Division**

* Age of Child is based on the Age of the Child on April 30, 2007
 (The 4U and 5U May enter entire teams or partial teams and we will supplement)

CHECK THIS BOX IF YOU ARE INTERESTED IN PLAYING IN THE ALL-STAR PROGRAM

DIVISIONS

<input type="checkbox"/> 4 Year Old - Tee-Ball-(As long as they turn 4 by Dec 31, 2006) If your Child is 3 or 4 years old on April 30, 2007	<input type="checkbox"/> 8 Year Olds - Coaches Pitch If your Child is 8 years old on April 30, 2007
<input type="checkbox"/> 5 Year Old - Tee-Ball If your Child is 5 years old on April 30, 2007	<input type="checkbox"/> 9 Year Olds (Transition Year - Amended Kid Pitch Rules) If your Child is 9 years old on April 30, 2007
<input type="checkbox"/> 6 Year Olds - Tee-Ball If your Child is 6 years old on April 30, 2007	<input type="checkbox"/> 10 Year Olds If your Child is 10 years old on April 30, 2007
<input type="checkbox"/> 7 Year Olds - Tee-Ball/Coach Pitch (Transition Year) If your Child is 7 years old on April 30, 2007	<input type="checkbox"/> 11-12 Year Olds If your Child is 11 or 12 years old on April 30, 2007
	<input type="checkbox"/> 13-14 Year Olds If your Child is 13 or 14 years old on April 30, 2007

Parental (Adult) Support: Please check a box and participate in our youth program.

Team Manager - Assistance Coach - Team Sponsor (\$350) - Team Parent

I, the parent/guardian of the registrant, a minor, agree that myself and the registrant will abide by all rules of the Lake Area USSSA Youth Baseball. In recognizing the possibility of injuries associated with baseball, I hereby release, and or otherwise indemnify the Lake Area USSSA Youth Baseball, all of it's affiliated organizations, their sponsors, employees and associated people against any claim by or on behalf of the registrant as a result of the registrant's participation in the programs and being transported to or from the game.

CONSENT FOR MEDICAL TREATMENT TO A (MINOR)

As the parent or the legal guardian of the above named player, I hereby give my consent for EMERGENCY MEDICAL CARE prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life or well-being of my dependent.

BY: PRINT: _____ Sign: _____ Date: _____

OFFICE USE

PAYMENT AMOUNT: _____ CHECK # _____ DATE: _____ RECEIVED BY (PRINT): _____

NOTES: