WESTERVILLE YOUTH BASEBALL AND SOFTBALL LEAGUE 2018 SPRING REGISTRATION FORM				
·				-10) BRH (11-12) BBH (13-14) BKH (15-18)
Girls: GTB (5-6) GCP (7-8) GGH (9-10) GRH (11-12) GBH (13-15) GKH (16-18)				
PARENT(S) / GUARDIAN(S) INFORMATION				
FATHER Primary Contact MOTHER Primary Contact				
	•			·
Last Name:				Last Name:
First Name:				First Name:
Address:			′	Address: Zip Code:
City: Zip Code:           Cell Phone: ()			Call Dhane: (	
E Mail Address:			Cell Phone: ()	
E-Mail Address:Occupation:			E-Mail Address:	
				Occupation:
			Company:	
☐ Father: I offer to volunteer as: ☐ Head Coach☐ Ass't.Coach ☐ Umpire ☐ Scorekeeper ☐ Other				
☐ Mother: I offer to volunteer as:☐ Head Coach☐ Ass't.Coach ☐ Umpire ☐ Scorekeeper ☐ Other				
PLAYER INFORMATION				
☐ Boy☐Girl Name: (Last)			(First	)Date of Birth:/
Name of School/Pre-School (at t	ime of registra	tion):		Grade:
From April 15 to July 31, will you have recurring schedule conflicts: ☐ No ☐ Sch. Sports ☐ Other ☐ Skill Level (Check One): ☐ First Time ☐ Fair ☐ Average ☐ Good ☐ Very Good				
☐ Pitcher (Check One): ☐ Fi			_	·
			_	
□ Catcher(Check One): □ First Time □ Fair □ Average □ Good □ Very Good				
Last Spring's League: Last Spring's Team: Last Spring's Team: Be on another team				
Did you play any ball last Fall? ☐ Yes ☐ No League: Team: Team:				
Comments:				
NOTE: THE FOLLOWING HOLD HARMLESS AGREEMENT MUST BE READ BY PARENT OR LEGAL GUARDIAN AND SIGNED PRIOR				
TO CHILD'S PARTICIPATION IN THE WYBSL PROGRAM.				
The undersigned parent or legal guardian, in consideration of the acceptance of their child as a participant in the Westerville Youth				
Baseball and Softball League (WYBSL) does hereby: 1) Agree to assume any and all risk and liabilities incidental to active				
participation in WYBSL by such child; 2) Agree to indemnify, defend and hold WYBSL, its trustees, staff officers, coaches, officials				
and all volunteer workers harmless from and against any claim, demand and liability for any injury, property damage and loss or				
damage to personal property; 3) Acknowledge and understand that no medical insurance is maintained by WYBSL, such insurance				
being the sole responsibility of each participant; and 4) Agree that prior medical or health problems must be disclosed by them to				
WYBSL in writing prior to any child being assigned to a team. I also understand that Fall Ball teams are not kept together for the				
Spring/Summer program.				
Signature of Parent or Legal Guardian: X				
<b>REFUND POLICY:</b> In order to request and receive a refund, a parent or guardian must send an e-mail message to register@wybsl.org				
(with the word REFUND in the subject line) – reporting the player's name, league, date and reason for withdrawal. If the withdrawal is reported: (1) By March 31, a full refund will be given; (2) By April 30, a \$25 processing fee will be charged; (3) On or after May 1,				
there shall be no refund.				
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<u>LEAGUE FEES</u>	Fee	Fee	Fee	FAMILY PLAN (Calculated from highest to lowest Registration Fee)
Tee-Ball – Boys or Girls (5-6)	\$79	\$24	\$103	First two players @ Registration Fee + Fields Fund Fee (Total Fee)
Coach Pitch – Boys or Girls (7-8)	\$90	\$24	\$114	All Others: Each @ \$24 Fields Fund Fee only
Green Hat – Boys or Girls (9-10)	\$95 \$100	\$24	\$119	LATE REGISTRATION PENALTY – After March 19 Additional \$20/player, plus loss of Family Plan Discounts (if applicable)
Red Hat – Boys or Girls (11-12)  Blue Hat – Boys (13-14) Girls (13-15)	\$100 \$105	\$24 \$24	\$124 \$129	Additional \$30/player, plus loss of Family Plan Discounts (if applicable)  There is a \$30 charge for any returned check or charge.
Black Hat Boys (15-18) Girls (16-18)	\$110	\$24	\$134	ere is a 450 charge for any recurring check of charge.
FOR LEAGUE USE ONLY Registrar:				
Birth Certificate: ☐ Not Needed – Continuing Player ☐ Reviewed by Registrar ☐ Still Needed in Order to Play				

Total Paid: \$\_

☐ Cash ☐ Check #\_\_\_\_ ☐ Credit/Debit Card (Attach Authorization) Date:\_