

Demopolis Cal Ripkin Sign-Up Sheet

Please do not use this form for Babe Ruth

Name: _____ Date of Birth: _____

Address: _____ Phone#: _____

_____ Last Year's Team: _____

Parents' Names & Phone Nos. (include work Numbers, Cell Numbers): _____

Email address: (optional) _____

Daddy (or other) wants to Coach: Yes No Maybe (circle one) Phone No. _____

Insurance Company & Policy#: _____

Doctor's Name & Phone#: _____

Medications, Allergies, etc... : _____

Emergency Contacts(Include Home, Work, and Cell Numbers): _____

The above information is correct to the best of my knowledge. I understand that my child must live within the Cal Ripkin defined boundaries to be eligible to play in Demopolis. Permission is granted for my child to participate in the Demopolis Cal Ripkin Baseball League(s). I understand that if an injury to my child does occur & medical attention is required, I will be responsible for any cost of treatments & will hold harmless the City of Demopolis, the Parks and Recreation Dept., coaches, players, and any other persons associated with the league. My child has my permission to participate in any and all functions including games, practices, tournaments, and all related functions associated with the league.

Parent's Signature: _____ Date: _____

Fees:
T-Ball & 6 Year-Olds: \$30.00 – (Includes Hat, Jersey, and Trophy; you buy white pants)
7 – 12 Year Olds: \$50.00 – (Includes Hat, Jersey, and Belt; you buy white pants w/ belt loops)
(2 players in same household \$90.00; 3 Players \$130.00; 7-12 yr. Olds only)

<u>DCRL Use Only</u>			
Amount Paid _____	Date _____	Check No. _____	Initials: _____
Birth Certificate: _____	League Age _____	Jersey Size _____	