CRITTENDEN COUNTY DUGOUT CLUB REGISTRATION FORM

2020 Youth Baseball / Softball / Kickball

* * * DEADLINE IS MARCH 7 * * *

Registration form must be received by March 7, 2020 with registration fee and a copy of Birth Certificate for the player. We want everyone to play. If you cannot afford the full registration fee, talk to a Dugout Club representative before registration deadline about a discount. There is also a discount for multiple players from one family. Total cost for 2 players is $60 and 3 players or more is $75. Registration after March 7 carries a $25 penalty. The absolute final day to register even by paying penaltiy is March 21. Skills assessment is 10 a.m., to noon Saturday, March 7 at Crittenden County Middle School gymnasium for all players age 7-up who are new to the league or are moving up to a new age division.

SPECIAL NOTICES:

1. The cutoff for age grouping for Baseball is a player turning a year older before May 1.
2. The cutoff for age grouping for Softball is a player turning a year older before January 1.
3. All Leagues *EXCEPT* Kickball & Co-ed Rookie will have away games at Eddyville, Princeton, Dawson Springs and Cadiz.
4. With the exception of Kickball and Co-ed Rookie leagues, boys must play baseball and girls must play softball.
5. Children at age 5 have an option to play Kickball or Co-ed Rookie Baseball.

FEES: Kickball $25 **Youth Baseball/Softball $40**

--- (Check One Below) ---

Kickball (ages 4-5 Boys & Girls) must be 4 before May 1 (begins in May)

Co-ed Rookie (ages 5-6 Boys & Girls) must be 5 before May 1

Boys' Baseball Rookie (7-8) (Coach Pitch) Minor (9-10) (Live Arm) Major (11-12) (Live Arm)

Girls' Softball Rookie (7-8) (Coach Pitch) Minor (9-10) (Coach Pitch & Live Arm) Major (11-12) (Live Arm)

PERSONAL INFORMATION:

Player Name: _____ Age:_____ DOB:_____

Address: _____

Phone: _____ Email: _____

Last Team to Play for: _____ Year Played: _____

UNIFORM SHIRT SIZE (Players must provide their own pants. A shirt and cap will be provided in most leagues)

Circle One: 6/8 10/12 14/16 Adult S Adult M Adult L Adult XL Adult XXL Other:_____

PARENT/GUARDIAN CONSENT FOR TREATMENT:

I herby give my consent for any treatment as provided by his/her coach or other adult escort in case of an injury or illness while participating in any practice, game, or other league activity sanctioned by the Crittenden County Dugout Club. I understand that this is to prevent undue delay in treatment. Furthermore, I agree to allow my child to be taken to a licensed physician and/or their designee in the case of an emergency. I will list my allergies and/or pre-existing physical conditions that need to be noted before treatment. (use back if needed)

Please list any special needs or medical conditions child's coaches should know about: _____

_____

Mother's Name:_____ Father's Name:_____

Name of Health Insurance:_____ Policy #: _____

Registrant agrees to indemnify and hold harmless the City of Marion, County of Crittenden and Dugout Club and its officers, directors, agents and employees from and against claims, damages, losses and expenses, including but not limited to attorneys' fees, arising out of or resulting from the negligence or misconduct of others.

Signature:_____ Relationship: _____Date:_____

Return to: Dugout Club P.O. Box 5, Marion, KY 42064

MAKE CHECKS PAYABLE TO CRITTENDEN COUNTY DUGOUT CLUB