## ALL PARTICIPANTS MUST HAVE THEIR OWN HELMET TO PLAY GIRLS 8 AND UP MUST HAVE FACE GUARDS ON HELMETS. ROXANA REC & TRI-CITY AGENCIES ARE RESPONSIBLE FOR DETERMINING WHICH ROSTER A CHILD IS PLACED ON - NOT THE COACH OR PARENTS!

DIVISION	T-SHIRT SIZE: Youth size YS(6/8) YM(10/12) YL(14/10 Adult size AS AM AL AXL A	
NAME	MALE	FEMALE
DID YOU PLAY LAST YEAR? YES	NO IF YES, WHAT	ТЕАМ?
ADDRESS	CITY	ZIP
BIRTHDATE//	AGE PHON	E
SCHOOL ATTENDING NY MEDICAL CONDITIONS?		
EMERGENCY CONTACT		
Interested coaches and assemble registering agency. ALL Complete before being assigned a to Recreation/Tri-City I		application form at the minal background check participating. Roxana ill coach each team.
**I, the undersigned or legal guardian of the do hereby consent and agree that the abaseball/softball program. I acknowledge participation in the above name programployee, or officer of an	he above named child, do agree and above named minor may participate in e that there are certain risks of physicagram which may occur through no faul of the Tri-City Recreation League, Road/or any other sponsors or party**	pide by the Parents Code of Ethics. I the Roxana Recreation/Tri-City al injury associated with my child's lt of any volunteer, participant,
Signature of parent or legal guardian  Email Address		Date
OFFICE USE ONLY:		
DATE RECEIVED BY	RECEIPT # DI	VISION PLACED IN