



**FALL 2009 BOYS' AND GIRLS' BASEBALL/SOFTBALL
REGISTER ONLINE AT WWW.HYAASPORTS.COM OR USE THIS FORM
(**SAVE THE ENVIRONMENT!** - - PREFERRED METHOD IS ONLINE)**

Check one:

- | | | | |
|--------------------------|----------------------|---------------|-------------------------|
| <input type="checkbox"/> | - Co-Ed T-BALL | Date of Birth | 05/01/2003 - 04/30/2005 |
| <input type="checkbox"/> | - Boys' Baseball | Date of Birth | 05/01/1992 - 04/30/2003 |
| <input type="checkbox"/> | - Girls' Only T-Ball | Date of Birth | 01/02/2003 - 01/01/2006 |
| <input type="checkbox"/> | - Girls' Softball | Date of Birth | 01/02/1993 - 01/01/2003 |

Player Last Name: _____ Player First Name: _____

Player Birth Date: (MO/DAY/YR) _____/_____/_____

Player Shirt Size (Circle One): YS YM YL AS AM AL AXL

Home address (NO PO BOX): _____

City: _____

ZIP : _____

GUARDIAN INFORMATION:

MOTHER'S NAME: _____ Daytime phone: _____/_____-_____

Evening phone: _____/_____-_____

FATHER'S NAME: _____ Daytime phone: _____/_____-_____

Evening phone: _____/_____-_____

PRIMARY - E-MAIL ADDRESS: _____ (to be used for all communication)

I/We understand there are inherent risks involved in participation in organized sports. I/We, the undersigned parents/guardians of the above named candidate, hereby give my/our approval for his/her participation in any and all team activities during the current season. I/We assume all risks and hazards incidental to the conduct of the activities and transportation to and from all activities. I/We do further hereby release and resolve to hold harmless the local league, Huntersville Youth Athletic Association and its associated organizations, the organizers, supervisors, participants, and persons transporting my/our child to of from activities, for any claim arising out of an injury to my/our child or for any other claim or action arising out of negligence or otherwise, except to the extent and in the amount covered by accident or liability insurance provided by H.Y.A.A. In case of injury to my/our child, I/we hereby waive all claims against the organizers, and or supervisors appointed by them. I/We, likewise, release from responsibility any person transporting our child to and/or from HYAA activities.

Background Check and Refund Policy: All coaches and assistant coaches agree to submit to an independent criminal background check and to provide the last 4 numbers of their SSN and their DOB where if asked by HYAA leadership for purposes of independent criminal background check.

Refund Policy: Players who withdraw from the league will be refunded their registration fee minus a \$15 administrative fee if withdrawn prior to the first day of practice. Players who withdraw from the league will be refunded their registration fee minus a \$50 processing fee (\$15 administrative + \$35 uniform fee) if withdrawn after the first day of practice.

Parent/Guardian Signature: _____ Date: _____

REGISTRATION FEES* (Check payable to 'HYAA'):

- T-Ball - \$94*
- Baseball or Softball - \$118*

Volunteers Needed – please check if interested in coaching

- Head Coach
- Assistant Coach

***Discounts-**

- For families with multiple players; \$10 discount for all siblings..
- *Girls' players with a usable uniform from spring 2009 - Discount \$20.
- For families with financial challenge, HYAA will provide assistance upon request and proof of need. Please email hya28078@gmail.com for financial aid inquiry.

Mail form and check payable to 'HYAA' to: TODD HARWOOD – 14321 MACLAUREN LANE – HUNTERSVILLE – NC – 28078