

**NEW MILFORD BABE RUTH LEAGUE REGISTRATION FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Parent Work Telephone: \_\_\_\_\_

Emergency Telephone: \_\_\_\_\_

Shirt Size: YOUTH Small Medium Large X-Large  
ADULT Small Medium Large X-Large XX-Large

Pants Size: YOUTH Small Medium Large X-Large  
ADULT Small Medium Large X-Large XX-Large

Parent willing to be: Coach Manager Board Member Other \_\_\_\_\_

All families, regardless of the family's position in the league, must work the concession stand a minimum of two (2) full games per player.

I/we the parents of the above-named candidate for a position on an athletic team hereby give my/our approval for my/our son to participate in all activities during the current season. I/we assume all risks and hazards incident to such participation including transportation to and from activities; and I/we do hereby waive, release, absolve, indemnify, and agree to hold harmless the borough of New Milford, the commission, the organizers, the sponsors, supervisors, participants, and persons transporting my/our child to or from activities for any claim arising out of and injury to my/our child except to the extent and in the amount covered by accident and liability insurance.

We reserve the right to take appropriate action and or suspend any child for inappropriate behavior in any recreation and Babe Ruth sponsored program.

Payment Type:

Check # \_\_\_\_\_

Cash: \_\_\_\_\_

\_\_\_\_\_  
Parent Signature