ST. MICHAEL BASEBALL REGISTRATION FORM
Spring 2010 Season

PLAYER INFORMATION:

Last Name	First Name	Birthdate	Gender	Current Grade

Parents/Guardians	Address	City	Zip	Phone
E-mail Address				

BASEBALL SHIRT: *Players can use prior year shirt or order a new one for **$10*** *New Shirt size:*_____

BASEBALL PANTS: ***Please indicate player's pant size.***

- **Youth** Medium Large
- **Adult** Small Medium Large X-Large XX-Large

PLEASE CIRCLE BELOW IF INTERESTED:

Head Coach Assistant Coach Team Parent

CYO RELEASE FORM AND CODE OF CONDUCT must be signed by all players and parents for current school year. If your child has not played a sport this school year, please find the forms on the booster's web site at www.stmichaelboosters.org and select the forms page.

PAYMENT INFORMATION: (*payable to St. Michael Boosters*) due NO LATER THAN 1/30/2010

- Registration Form and Fee: **$50**
- Plus Yearly Booster Membership Fee *__$30__
  **If you paid this fee in the Fall or Winter Season, you do not need to pay it for Spring Season*

TO: Gary Telles
6690 Seaboard Lane **or** send home through: ***Alex Telles, 6H***
West Chester, OH 45069
E-mail: gtelles@fuse.net or 759-6645 with questions

CONSENT FOR EMERGENCY MEDICAL TREATMENT:

We, the Parents of _____, give permission for emergency medical treatment for our child for illness or accident if we cannot first be contacted.

Emergency Phone of Parent or Guardian: Name_____Phone_____

Emergency Contact Other Than Parent: Name_____Phone_____
Relationship _____

Does your child have any allergies or require any special Medication? YES _____NO _____
Explain: