BEEKMANTOWN YOUTH COMMISSION

2017 BASEBALL / SOFTBALL / T-BALL REGISTRATION FORM

Name of Participant _____ Grade as of Sept. 2017_____

Gender _____ Date of Birth _____ Birth certificate copy on file at BYC? Yes _____ No _____

Phone # _____ Cell # _____ Emergency # _____

Address _____ City _____ State ____ Zip Code _____

Parent/Guardian _____ Ethnicity _____

E-mail address _____

Participant has registered for BYC activities in the past: Yes ____ No ____

ALL Non Residents must register to play in the town they reside before seeking a release to play baseball, softball, t-ball, soccer and basketball elsewhere. Residents of the Town of Beekmantown will be assigned to a team before non-residents.

REGISTRATION: Registration for Baseball/Softball/T-ball starts March 20, 2017. The registration cutoff date is April 14, 2017. There are no fees associated with these activities.
PLEASE NOTE: Registration for Summer Camps, Fall Soccer & Winter Basketball will take place June 2, 2017. All registrants (for county programs: baseball, softball, fall soccer, winter basketball) must provide a copy of the child or children's birth certificate(s) at the time of registration.

AGE GROUPING / ELIGIBILITY: Baseball, softball and T-ball are offered as part of the county's league program. Games begin in mid-June. Practices may start in May. Coaches will contact you with details. Please note the age grouping below:

AGE GROUPING / ELIGIBILITY	Born After	But Before
Grasshopper	8/1/2007	7/31/2010
Pee Wee	8/1/2004	7/31/2007
Pony	8/1/2000	7/31/2004

Sport	Age Group	Resident	Non-Resident
Baseball	☐ Grasshopper ☐ Pee Wee ☐ Pony		
Softball	☐ Grasshopper ☐ Pee Wee ☐ Pony		
T-Ball	☐ *Children must have documentation showing they have completed a school kindergarten program.*	**Residents Only**	

PARENTAL CONSENT: I give permission for my child, _____, to participate in the Town sponsored activities checked above, understanding that there is NO Town accident insurance for this/these activities. In the event of an emergency, I hereby give permission for my child to be given emergency first-aid treatment and/or to be examined and treated at the nearest medical facility. I also understand that I am responsible for picking up my child promptly following each activity. Youth Commission staff cannot supervise or be responsible for them once camp has ended. I understand that my child(ren) must have documentation showing they have completed a school kindergarten program in order to participate in any sport or any camps that list kindergarten age as appropriate.

_____ _____ _____
Signature of Parent/Guardian Phone # Date

NOTE: Persons interested in coaching baseball or softball should pick up an application at the Beekmantown Town Hall. Completed forms should be returned by April 18, 2017.