



**OPTIMIST CLUB OF WESTCHESTER
BASEBALL PROGRAM**

FOR CLUB USE

DATE: _____ CHECK # : _____

DIVISION: _____ AMOUNT: _____

DOB VERIFIED: _____ CASH RCVD BY: _____

CHILD'S NAME: _____

HOME PHONE: _____

ADDRESS: _____ **CITY:** _____ **ZIP:** _____

DATE OF BIRTH: ____ / ____ / ____ **AGE:** ____ **SIZE:** ____ **SCHOOL:** _____
MONTH DAY YEAR TOP BOTTOM

MOTHER'S NAME: _____

FATHER'S NAME: _____

HOME PHONE: _____

HOME PHONE: _____

WORK PHONE: _____

WORK PHONE: _____

CELL / BPR: _____

CELL / BPR: _____

EMAIL: _____

EMAIL: _____

I hereby give permission for my child to participate in the OPTIMIST CLUB OF WESTCHESTER's athletic program. I understand that the coaches, managers, administrative staff of the program and club members are unpaid volunteers who donate their time and effort. Most coaches and managers are parents of children in the program who have joined together to participate in an organized league so their children can enjoy the benefits of league play. I understand that all athletic activities involve the risk of injury to my child and I hereby waive and release Optimist International, Optimist Club of Westchester, its officers, directors, managers, and coaches from any and all liability arising from my child's participation in this program and agree to indemnify and hold them harmless from any and all claims arising from participating in the program. I assume full responsibility for the return of all equipment supplied by the Club.

ALL FEES PAYABLE AT REGISTRATION

SIGNATURE OF PARENT / GUARDIAN