

# MCBR/USSSA

## Registration Form

Please attach Birth Certificate to form

\_\_\_\_\_  
*TEAM*  
*(circle one)* returning player  
new player

League Information: (circle one) 10U Minors 12U Majors 13 Prep 14-15 Juniors 16-19 Seniors

All schedules/league information are located on our league web site: [www.mcbaseballregion.com](http://www.mcbaseballregion.com)  
Please return form to manager of the team

### Player Information:

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_  
Address \_\_\_\_\_ Apt. Number \_\_\_\_\_  
City \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone Number \_\_\_\_\_ Birth Date \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_  
Shirt Size \_\_\_\_\_  
E-mail Address \_\_\_\_\_

### Parent Information:

Father's Last Name \_\_\_\_\_ First \_\_\_\_\_  
Phone Number \_\_\_\_\_ 2<sup>nd</sup> Number \_\_\_\_\_  
Mother's Last Name \_\_\_\_\_ First \_\_\_\_\_  
Phone Number \_\_\_\_\_ 2<sup>nd</sup> Number \_\_\_\_\_

**To player and parent:** I hereby approve the registration of my child to participate in MCBR/USSSA baseball program. I understand and agree that neither MCBR/USSSA, its' officers, coaches or other agents, or any townships or School Districts will be held responsible for any and all injuries. I also agree to show and support good sportsmanship and abide by the rules of MCBR/USSSA.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Player's Signature \_\_\_\_\_ Date \_\_\_\_\_