

# Baseball



Ages: 7 to 14

Kids currently in grades 2 through 8 are invited to take part in the exciting Boys Baseball at Haledon Rec!

## Divisions:

- Peewee ages 7 to 10
- Majors ages 10 to 12
- Pony ages 13 & 14

Season runs from April through June!

**REGISTER NOW!!!**

**\*Limited space is available\***

Registration Deadline MARCH 25, 2016

Registration Fee: \$60 per child. T-Bowl is \$30 per child.

**\*\*Please include a copy of your child's birth certificate when registering.\*\***

Mail Registration to:

Haledon Recreation

83 Roe St.

Haledon, NJ 07508

Or come in person the Haledon Rec Committee will be accepting applications from 6pm-8pm.

**\*\*\*Not a school sponsored event\*\*\***

Haledon Recreation  
2016 Ages 7 to 14 Baseball

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Gender: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Emergency Phone & Contact: \_\_\_\_\_  
Email Address: \_\_\_\_\_

T-Shirt Size (please circle one): YS YM YL AS AM AL AXL  
Pants Size (please circle one): YS YM YL AS AM AL AXL

Where did you receive this flyer? \_\_\_\_\_

Parent/Guardian Information:

Mother's Name: \_\_\_\_\_ Work E-mail \_\_\_\_\_  
Business Name/Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work E-mail \_\_\_\_\_  
Business Name/Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_

Does your child have any impairment? \_\_\_\_\_

Coaches: We need coaches! If you are interested, please fill in the information below.

\_\_\_\_\_ name \_\_\_\_\_ phone \_\_\_\_\_

I hereby give consent for my child to participate in the Haledon Recreation Baseball Program. I assume all risk in regard to participation in this and any other Haledon Recreation program in which my child may participate. I release, indemnify and agree to hold harmless the Haledon Recreation coaches, and volunteers from any liability that may result from participation in Haledon Recreation activities.

By my signature, I attest to the following:

- That the above information is correct.
- That in the event of a medical emergency, I authorize the Haledon Recreation to seek emergency medical care for my child as deemed necessary by the Director.

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date)