



DUNNVILLE MINOR FASTBALL

c/o 156 Fairview Ave East, Dunnville, Ontario N1A 1B1

www.dunnvilleminorfastball.com

HOUSE LEAGUE REGISTRATION FORM

Office Use Only:

CASH CHEQUE AMOUNT: _____

JUMPSTART ON#: _____

Please Print Clearly in Pen

Male <input type="checkbox"/>	Date of Birth:			T-Shirt Size: adult youth				
Female <input type="checkbox"/>	Year:	Month:	Day:	XS	S	M	L	XL
Name:								
Address:								
City:				Postal Code:				
Landline:				Cellphone:				
Parent(s)/Guardian(s):								
Email:								
Allergies / Health Concerns:								
<input type="checkbox"/> First Time Player	<input type="checkbox"/> Previous Pitching Experience	<input type="checkbox"/> Previous Catching Experience						

Special requests will be considered and may be honoured only if team and/or division parity can be maintained. **Only one request per player.**

Same Team as Sibling - Name: _____

Play with a Buddy (applies up to Mite Division ONLY) - Name: _____

How did you hear about DMF registrations?

WEBSITE

EMAIL

SCHOOL / ADVERTISING FLYER

OTHER

LIABILITY WAIVER & PARENT/GUARDIAN CONSENT

As parent/legal guardian of the above named child, I hereby give my consent and approval to his/her participation in any and all activities of Dunnville Minor Fastball for the current year. I agree that Dunnville Minor Fastball, its agents, volunteers, administrators, sponsors, coaches, managers, umpires and assigns shall be relieved of all responsibility and not held liable in case of accident or injury. I understand that this activity is governed by rules and regulations which are designed for the safety and protection of its participants, and I agree that my child and family members will abide by "Policy 2014-02: Public Conduct on Haldimand County Property". I hereby undertake to ensure that the above named child understands and abides by all such rules and regulations. I also understand that this activity requires a minimum of fitness for safe participation. I also give permission to allow the above named child's picture, including their team picture, to appear on the Dunnville Minor Fastball website or other Dunnville Minor Fastball promotion.

I certify that I have read all the terms and conditions of this waiver and do intend to be legally bound thereby.

Signature of Parent/Guardian

Date

Dunnville Minor Fastball is run by volunteers. Are you interested in helping us?

COACH

ASSISTANT COACH

EXECUTIVE MEMBER

UMPIRE

CANTEEN HELPER

TRAVEL TEAM COACH

Name & Phone Number/Email Address: _____