



Registration 2018

Buckner's Source for Sports
151 Queen Street, Dunnville

Saturday March 3rd – 9am to 12pm

Saturday April 7th – 9am to 12pm

** or any other day during regular business hours with Buckner's staff up to April 7th **

Division	Birth Year	EARLY BIRD Registration Fee until March 3 rd	Registration Fee March 4 th - April 7 th
Tball	2014/2013/2012	\$60	\$80
Tyke	2011/2010/2009	\$75	\$95
Mite	2008/2007/2006	\$90	\$110
Novice	2005/2004/2003	\$90	\$110
Atom	10 yrs under		\$110
Squirt	12 yrs under		\$110
Peewee	14 yrs under		\$130
Bantam	16 yrs under		\$130

* Divisions and/or age groups may change depending on final registration numbers ♦ Early bird registration capped at \$300 per immediate family when paid in full before March 3rd, 2018 ▲ Registration capped at \$350 per immediate family when paid in full before April 7th, 2018

NOTE: Financial assistance may be available through Jumpstart for those who qualify

ALL PLAYERS REGISTERED WITH DUNNVILLE MINOR FASTBALL MUST ABIDE BY THE FOLLOWING RULES:

- A HELMET WITH A FACE MASK AND A GLOVE ARE MANDATORY AND MUST BE SUPPLIED BY THE INDIVIDUAL PLAYER IN EVERY DIVISION. HELMETS MUST BE WORN WITH CHINSTRAP DONE UP.
- PROPER RUNNING SHOES OR BALL CLEATS MUST BE WORN (ABSOLUTELY NO SANDALS).
- ABSOLUTELY NO JEWELLERY ON THE BALLFIELD (MEDICAL ALERT EXEMPT).
- NO FOUL LANGUAGE OR INAPPROPRIATE BEHAVIOUR.
- TREAT UMPIRES, PLAYERS, COACHES, AND SPECTATORS WITH RESPECT.
- SMOKING OR CONSUMING ALCOHOL IS NOT PERMITTED ON COUNTY PROPERTY
- PLAYERS, FAMILY MEMBERS, SPECTATORS, AND VOLUNTEERS WILL ABIDE BY HALDIMAND COUNTY POLICY "2014-02: PUBLIC CONDUCT ON HALDIMAND COUNTY PROPERTY".

REGISTRATION DEADLINE IS APRIL 7th, 2018

www.dunnvilleminorfastball.com



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: _____