

YOUTH DEVELOPMENT PROGRAM

Registration Form

\$35.00 per youth

Sport: YOUTH BASEBALL

Participant Name: _____ **Sex** ____ **Birthday** ___/___/___

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Height:** _____ **Weight:** _____

School: _____ **Grade:** _____ **District:** _____

T-Shirt Size: _____

Special Health Needs: _____

Emergency Contact

Parent/Guardian Name: _____ **Phone** _____

Home Phone: _____ **Cell Phone:** _____

Emergency Contact Person: _____ **Relationship:** _____

I give my son/daughter _____ permission to participate in recreation programs. I understand safety and precautions will be provided. I waive all responsibility of Unity C.D.C and participating churches and organization for any and all injuries my child may sustain while participation in the summer league. Unity C.D.C will not be responsible for transportation to and from the league game and practices. In case of injury I give my permission to youth director / or assigned councilor to administer first aid and contact emergency services for my child. I am aware that photographic pictures of my child may be taken during the recreation Program. I am aware that pictures may be posted to a website, video, newsletter or newspaper. The pictures will be used for the purpose of illustrating the activities during the Unity CDC recreation Program and fundraising.

Parent/Guardian Signature _____ **Date** _____

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BASEBALL REGISTRATION

All Star: Ages 11 –13 Boys & Girls

Play-Offs: Ages 8-10 Boys & Girls

T-Ball: Ages 5-7 Boys & Girls

REGISTRATION & PARENT INFORMATION SESSIONS

Location: Unity CDC, 1 Doris Ave, Joliet, IL

Call now!

Unity CDC YOUTH DEVELOPMENT PROGRAM

1 Doris Ave (Front) Joliet, Illinois 60433

Phone: 815-722-9200 Fax: 815-722-8559 or

Sign up now at www.unitycdc.org

