

Wakefield Recreation Association (WRA)-Baseball
Youth Sports Registration/Release of Liability
**Baseball \$20.00 registration fee, -\$5 for each additional child
(1st child \$20, 2nd \$15, 3rd \$10 and so on)**
Payment to be made at the Wakefield City Building

Name: _____ Date of Birth: _____ Grade: _____
(Print please)

Parent(s): _____ Phone: _____

e-mail: _____

Shirt size: Youth S ___ M ___ L ___ Adult S ___ Adult M ___ Adult L ___ Adult XL ___

I hereby consent to allow my son or daughter to participate in the WRA Sports program. I also consent not to hold the Wakefield Recreation Association or any of their officers/program volunteers responsible for any injury to my son or daughter.

The Wakefield Recreation Association is a volunteer organization and I will not pursue any legal action against any volunteer member of this organization. I have read and understood the parent code of conduct and will abide by the rules WRA has mandated. If I choose to not to abide by the code of conduct, I understand I may no longer be able to attend WRA functions/activities and sports.

Parent's signature

Date

Please check this box if you would be interested in helping coach your child's team.

***** SCHOLARSHIPS AVAILABLE BY FIRST COME FIRST SERVE BASIS*****

Please check box if interested in scholarship. ***DATE STAMP is required for scholarship***

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