BATTER UP

Spring Baseball
Hayes-Taylor YMCA

Ages:
Co-ed
T-ball: 4-5, Modified Baseball: 6-8

YMCA Sports Philosophy: Participants have FUN in a safe learning environment. The YMCA believes in the God-given potential of every child; encourages teamwork and a sense of belonging.

Early Bird Registration (From April 8th thru April 21st)
$60.00 YMCA Members or $85.00 Potential Members

Standard Registration (From April 22nd thru May 10th)
$70.00 YMCA Members or $95.00 Potential Members

All registrations received after May 10th will have a $5.00 late fee.

Deadlines:
Financial Assistance Deadline – April 21, 2019
Early Bird Registration Deadline – April 21, 2019
Final Deadline for Registration – May 10, 2019

Important Dates:
Practices Start – Week of May 20, 2019
Games Start – Week of Jun 3, 2019
Meeting and Greet – May 14, 2019
Ages 4 - 8 at 6:00 PM

Important information: We do our best to honor any request that you may have for your child. Request can be for a certain coach, teammate or practice day and time. We cannot always honor your request but we will do our very best to try. Some games and practices may be off site.

Register Online at hayestaylor.org

Contact Lauren Brickhouse, Hayes-Taylor YMCA Sports Director, at 336.272.2131 or Lauren.brickhouse@ymcagreensboro.org for more information.

The mission of the YMCA of Greensboro is to put Judeo-Christian principles into practice through programs that build a healthy spirit, mind, and body for all.
**PLAYER INFORMATION**

First Name: ________________________ Last Name: ________________________  
Date of Birth: __/__/______ Age: _______ Age Group: ___________ Gender: _______ School: ___________  
Address: ___________________________________________________________________________________________________________________________________________________________  
City: ___________ State: ____ Zip: _______  
T-Shirt Size  
YS YM YL AS AM AL AXL  
Number of Seasons Play in this Sport: _______  

**PARENT/GUARDIAN INFORMATION**

Guardian #1 (person who will be contacted in case of practice/game changes or cancelations)  
Relationship __________________ Name: __________________________________________  
(C) ___________ Phone Carrier: ___________________________________________________________________________________________  
Email: _____________________________________________________________________________  
Guardian #2 Relationship __________________ Name: __________________________________________  
Email: _____________________________________________________________________________  

**AS A PARENT I WOULD LIKE TO (Circle one):**  

**REQUESTS: (Not all requests can be filled. Certain age groups cannot honor requests.)**  
Coach (Shirt Size: _____) Asst. Coach Team Parent Sponsor a Team ($150 one team; $200 two teams)  
Coach Request: ___________________________________________  
Sibling Request (one choice only): ___________________  
Night You CANNOT Practice:  
☐ M ☐ T ☐ W ☐ Th ☐ F  
1st Priority: Coach Sibling Night  

**RELEASE AND WAIVER OF LEGAL LIABILITY:**  

THIS IS YOUR RELEASE AND WAIVER OF LIABILITY (the "Release"). You individually and/or on behalf of any minor child, release the YMCA of Greensboro, Inc., its officers, directors, board members, employees, volunteers, agents, independent contractors, other participants and/or others acting on its behalf (collectively, "YMCA"). You agree that this Release is effective immediately.  

This is important to you and/or any minor children, so do not sign until you have had your questions answered. You provide this Release freely, and without duress under the following terms:  

1) GENERAL RELEASE. I hereby agree for myself and/or my child and our respective heirs, assigns and legal representatives, to indemnify, defend and hold YMCA and its officers, directors, board members, employees, volunteers, agents, independent contractors and other participants ("Releases") in the program harmless from any and all claim and causes of action of any nature for any and all personal injury or illness, including death, which may occur to me and/or my child or which may be aggravated during or by any activity during the course of the program in which I have decide to allow myself and/or my child to engage. I further waive any and all claims or causes of action, which I and/or my child may now or hereafter have against Releases which may at any time arise as a result of any act or thing occurring in or arising out of my and/or my child's participation in the program. I further expressly understand and agree the foregoing indemnity, release and waiver is intended to be as broad and inclusive as permitted by the law of the State of North Carolina and that any portion thereof is held invalid, it is agreed that the balance shall, not with standing, continue in full force and effect.  

2) ASSUMPTION OF RISK. I, individually and/or on behalf of any minor child, expressly and specifically assume any and all risk of injury, illness, death, or property damage resulting from my YMCA activities. You assume the risks: I, individually and on behalf of my minor child, understand that YMCA activities are strenuous and dangerous and should be engaged in only by persons in good health. I understand that I should consult a physician before enrolling myself and/or my child in the YMCA program. Once you sign, you are saying that you understand the risks involved and accept all of the risks.  

3) MEDICAL RELEASE. I, individually and/or on behalf of any minor child, further hereby release YMCA from any claim whatsoever which may arise as a result of any first aid, treatment, or services or assistance provided to me in connection with any injury that arises from activities at YMCA. A) I take full responsibility for my and my child(s) welfare and safety on or at YMCA activities. B) I hereby give permission for emergency medical treatment to be administered as deemed appropriate.  

4) INSURANCE. YOU ARE EXPECTED TO HAVE YOUR OWN HEALTH INSURANCE. You should understand that the YMCA does not carry insurance to cover injuries and losses that may befall you.  

5) PHOTOGRAPHIC RELEASE. I consent to be photographed and to allow YMCA’s use of any photos of myself and/or my minor child at its sole discretion.  

6) Parents of Code of Ethics. I agree to act in an appropriate manner and be supportive of all player/coaches/officials.  

HAVING READ, UNDERSTOOD, AND AGREE WITH THESE TERMS, I HAVE EXECUTED THIS RELEASE, TO BE EFFECTIVE IMMEDIATELY.  

Parent/Guardian Signature: ____________________________________________ Date ___________  

**Email contact:** You will receive emails from our player management system PlayerSpace. Please be sure to check your spam folder for potential emails as we reach the start of the season. Emails will come from this address: noreply@playerspace.com