



LYBA BASEBALL REGISTRATION

PLAYER INFORMATION (As it appears on birth certificate)

FIRST NAME:

LAST NAME:

DATE OF BIRTH:

AGE:

SHIRT SIZE:

YM

YL

AS

AM

AL

AXL

PARENT/GUARDIAN INFORMATION

FIRST NAME:

LAST NAME:

STREET
ADDRESS:

CITY:

ZIP CODE:

PHONE NUMBER:

EMAIL:

You can help enhanced the baseball experience for our youth by volunteering. It's also a great way to share in this journey with your child. No experience is necessary and training will be provided. We need volunteers to help with practices, games, running the scoreboard, and announcing the games.

VOLUNTEER:

COACH

ASST COACH

SCOREBOARD

Waiver of Liability

I, the Parent or guardian of the named child, having been informed of the above designated activity sponsored by the Lumberton Recreation and LYBA do hereby request that my child be accepted as a participant in said activity. I do hereby assume responsibility for any accident or injury which may occur while my child is engaged in activity participation of necessary transportation incidental to activity participation and do hereby on behalf of myself, my child, my heirs, executors and administrators waive and release and forever discharge any and all rights, claims, demands and causes of action for damages which I or my child may have or might otherwise hereafter have against the City of Lumberton, it's officers and employees, the Lumberton Recreation Department, LYBA, activity sponsors, supervisors and instructors, as well as any other person connected with said activity, for any and all injuries and damages which I may suffer while engaged in activity participation, necessary transportation incidental to activity participation, or as a result thereof

SIGNATURE:

DATE:

REGISTRATION:

PLAYER - \$25

LYBA MEMBERSHIP - \$5