

# Hastings Youth Athletic Association

Revised Yearly 2012

## In-House Registration

(Check One:)

Softball (Girls Only)

T-Ball (Co-ed)

Baseball

\_\_\_\_\_ Sea (Grade 1 & 2)

\_\_\_\_\_ Pre-Kindergarten

\_\_\_\_\_ Pee Wee 1 (Grade 1)

\_\_\_\_\_ Minors (Grade 3 & 4)

\_\_\_\_\_ Land (Grade 3 & 4)

\_\_\_\_\_ Kindergarten

\_\_\_\_\_ Pee Wee 2 (Grade 2)

\_\_\_\_\_ Majors (Grade 5 & 6)

\_\_\_\_\_ MTN (Grade 5 & 6)

I. Child's Name \_\_\_\_\_ Current Grade \_\_\_\_\_ Sex M F Age \_\_\_\_\_ Birthdate \_\_\_\_\_  
 (Last) (First)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

II. School \_\_\_\_\_ E-mail \_\_\_\_\_

III. Parent/Guardian Name \_\_\_\_\_  
 (Last) (First) (Phone)

Parent/Guardian Name \_\_\_\_\_  
 (Last) (First) (Phone)

Player lives with: Both parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Other \_\_\_\_\_

IV. Years of experience in the sport: (circle one) None 1 2 3 4 5 6 7

V. I (we) the below signed parent(s)/caregiver(s) understand there is an inherent risk when playing in sports and hereby give permission for our child to participate in this HYAA activity. I (we) understand HYAA is **not** responsible for accidents or injuries.

**HYAA reserves the right to limit the number of registrations per team and sport.**

Parent(s)/Caregiver(s) Signature \_\_\_\_\_ Date \_\_\_\_\_

VI. Each family that registers a youth will be **required** to volunteer approximately **10 hours** of time to assist the association during that season. Choose where you want to volunteer:

- Coach (Form \_\_\_\_\_)
- Asst Coach (Form \_\_\_\_\_)
- Help coach at practice/game

- Equipment Volunteer
- Volunteer Coordinator
- Phone caller
- Picture Coordinator
- Team Manager

- Division Coordinator
- Field clean up
- Facility maintenance
- Computer typing
- Help at tournament

- Help at registration
- Help at clinics
- Notary
- Help as needed

VII. **T-Shirt Size: Youth: S 8-10 M 10-12 L 14-16**  
**Adult: S 34-36 M 38-40 L 42-44 XL 44-46 XXL-48**

VIII: **Pants Size: Youth: M L XL**  
**Adult: SM M L XL XXL**

IX. Medical Emergency Permission: In the event of a medical emergency when a parent or caregiver isn't available, I hereby give permission for the coach to get medical treatment prescribed by medical personnel.

Parent(s)/Caregiver(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Clinic: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

X. Registration Fee : \_\_\_\_\_ XI. Any Special Needs or Medical Conditions: \_\_\_\_\_  
 Late Fee (\$25.00) : \_\_\_\_\_  
 Non Volunteer Fee (\$50.00) : \_\_\_\_\_  
**Total** : \_\_\_\_\_

Vacation or Camp Dates: \_\_\_\_\_

**MEDIA CLAUSE** My child has my permission to be photographed while participating in HYAA activities and to use my child's pictures on the website, in the paper, radio or in other media to promote HYAA.

**NO REFUND if a player drops after March 31st, 2012.**

Cash/Ck # \_\_\_\_\_

[www.hyaa.info](http://www.hyaa.info)

**HYAA 651-437-8838**

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