



# TWIN CITIES BABE RUTH 2016 REGISTRATION FORM

**Registration Days:** Tuesday, February 23, 6:00-8:00 pm – Borst Kitchen #1, Centralia  
 Thursday, February 25, 6:00-8:00 pm – VR Lee Bldg., Chehalis  
 Monday, February 29, 6:00-8:00 pm – Quesadilla Factory

*Players from either city can sign up at any of these locations.*

**Name:** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Age:** \_\_\_\_\_ Player must be 13, 14, or 15 before May 1, 2016. New players **MUST** submit a copy of their birth certificates.

I, the parent of the above named candidate for a position on a league team, do hereby give approval for the above named to participate in any and all league activities during the upcoming season. I do hereby waive, release, absolve, indemnify, and agree to hold harmless the Twin Cities Babe Ruth League, Inc. the City of Chehalis, the City of Centralia, organizers, sponsors, managers, coaches, and supervisors from all claims. I agree to utilize my own health insurance as primary coverage for any injury my child receives, realizing that the league's policy will provide secondary coverage only. I waive, to the extent not covered by accident or liability insurance, any claim against any person transporting my child to or from activities.

In the event of an injury and I cannot be reached, I do hereby give my permission to a team manager, coach, or league official to transport the above named player for medical treatment. I give my permission for the player to be treated by a hospital and/or doctor to the extent that treatment is necessary.

**I certify the above named attends the Centralia or Chehalis School District, resides within the geographical boundaries, or is grandfathered in the league.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REGISTRATION FEE: \$150 per player** (sibling discount \$50 per family) **plus Concession Stand Shifts\*\***

**\*\*Concession Stand Requirements for all Players:** All players are required to have a family member either work 2 shifts or pay for a hired worker to fulfill these shifts during the season for games at Wheeler Field and Stan Hedwall Fields. Information will be handed out by the managers/concession coordinators once the season starts for assignment of times and dates. Your understanding and commitment to TCBR is very much appreciated.

**Please be prepared to submit your payment at time of registration.**

**Make Checks payable to: Twin Cities Babe Ruth**  
**Questions? Email: [twincitiesbaberuth@gmail.com](mailto:twincitiesbaberuth@gmail.com)**

**VOLUNTEERS** – We are looking for volunteers. If you want to volunteer to help TCBR please fill out the blanks below.  
 Babe Ruth Thanks You!!

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

*The Chehalis or Centralia School Districts do not sponsor this event and the District assumes no responsibility for it. In consideration of the privilege to distribute materials, the Chehalis and Centralia School District shall be held harmless from any cause of action filed in any court or administrative tribunal arising out of the distribution of these materials, including costs, attorney's fees and judgments or awards.*

**OFFICE USE ONLY**

Birth certificate and proof of residency: Verified \_\_\_\_\_ Played Last Year \_\_\_\_\_ Pending \_\_\_\_\_

Concession/Treatment Forms Complete \_\_\_\_\_ Player's Fee Received \_\_\_\_\_ Discounted \_\_\_\_\_ Received by \_\_\_\_\_