

I.K.B.K. MINOR BALL ASSOCIATION
(Irricana. Kathryn. Beiseker. Keoma)
REGISTRATION FORM

Players Name: _____ Parent's Name: _____
Address: _____ E-mail Address: _____
Phone # _____ Cell Phone # _____
Alberta Health Care # _____
Emergency Contact and Phone # _____
Date of Birth: _____

PLAYER'S HEALTH CONDITIONS:

Medications: _____
Allergies: _____
Medical Conditions: _____
Recent Injuries: _____
Any information not covered above: _____

ALL ABOVE FIELDS MUST BE FILLED OUT

REGISTRATION FEES: Use Jan 1st as cut-off

*Please note fees may increase depending on the league teams participate in.

Rally Cap(ages 4-7)	\$50.00 _____
Baseball	
9U (born 2010-2011)	\$75.00 _____
11U (born 2008-2009)	\$75.00 _____
13U (born 2006-2007)	\$100.00 _____
15U (born 2004-2005)	\$100.00 _____
18U (born 2001-2003)	\$100.00 _____

*Uniform Deposit (held until returned – date June 30th) \$75.00 (per player) _____

*Players will forfeit their deposit to I.K.B.K Minor Ball if the uniforms are not returned by July 1st.

*Make cheques Payable to: **I.K.B.K. Minor Ball Association**

***Mailing Address:** **Box 469 Irricana, AB T0M 1B0**

*Your child will need a glove and appropriate shoes

*Batting helmets are supplied, but you may bring your own.

MINOR BALL NEEDS YOU

*Minor ball programs rely on parent volunteers to make a successful season. What will you help with? Choose to help in the following areas by leaving your name and telephone numbers. **Teams will be cancelled if no coaches are available or if there are not enough registrants.***

Coach/Supervisor* _____
Assistant Coach/Supervisor* _____
Team Manager* _____
Umpire (paid position)* _____

**For registration information, please contact Deanna Bell 403.935.4170
or visit www.ikbminorball.com**

WAIVER:

I, the undersigned, hereby declare that the foregoing statements are true. That in consideration of my application being accepted I hereby for myself, my heirs and administrators waive and release all rights, and claims of any sort, on my behalf or on behalf of my child or in my child's name against the I.K.B.K. Minor Ball Association, the participating leagues, towns and teams, their officers, employees, volunteers, coaches, umpires and managers.

Player Signature: _____ Parent / Guardian Signature: _____ Date: _____