



SOUTH LYON JUNIOR LEAGUE  
 BASEBALL/SOFTBALL PROGRAM  
 P.O. BOX 455  
 SOUTH LYON, MI 48178-0455  
 Email: registrar@sljl.org  
 Website: www.sljl.org

(League Use Only)	
Registration #:	_____
Date Paid:	_____
Check #/Cash:	_____
Fee Paid:	_____
Division:	_____
Team:	_____
Check Sig:	_____

### 2018 TRAVEL BASEBALL / SOFTBALL REGISTRATION FORM

1. All information requested **MUST** be filled out completely
2. Please Print
3. A photocopy of the player's birth certificate is required only if they make a team.

Player Name:	Date of Birth:
Address:	
City, State, Zip:	Phone (     )
Resident of Which City/Twp:	Cell Phone: (     )
Parents/Guardians:	Email:
Emergency Contact:	

<b>Payment Information (amounts may vary by age level)</b>	
<b>Due Dates</b>	
1 <sup>st</sup>	<b>\$150.00 - \$300.00 (depending on the team) is due upon being selected for the travel team.</b>
2 <sup>nd</sup>	<b>\$200.00 due before January 31, 2018</b>
3 <sup>rd</sup>	<b>Remaining balance, if any, is due as specified by February 28, 2018</b>

**All payments are Non-refundable.**

**Division (Circle appropriate try-out age level)**

8U	12U
9U	13U
10U	14U
11U	15/16U/17U

**WAIVER OF LIABILITY**

My child is in good physical condition and has no serious illness. I understand that baseball and softball are physical sports which may result in injury. I hereby authorize the league officials associated with my child's team to secure any emergency medical treatment for my child that they feel is necessary as a result of my child's participation in the South Lyon Junior League. I hereby waive any and all rights and claims for damages arising from injuries received while my child is playing or being transported to/from games and practices and other team activities. I also hold harmless the South Lyon Junior League, its Board of Directors, officials and trustees, any coaches or assistant coaches for any injury incidental to team activities or transportation to/from these activities. I attest to the factual accuracy of this registration and

signature below signifies that parent/guardian is in agreement with the Waiver of Liability.

Signature: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date: \_\_\_\_\_

- Registrations will only be accepted on this form – one form per player
- Make all payments payable to: **South Lyon Junior League** on or before their due dates
- Payment amounts may vary due to division level. The head coach will notify you as to the registration amounts and dates payments are due.
- NSF checks are subject to additional fees
- Any questions should be directed to the travel coach or the trustee of the travel program. Email addresses of league officials can be found on our website at www.sljl.org

(Parent/Guardian only)