

# G.E.A.R. Summer Baseball/Softball

Money and forms are due before March 11th. Please make all checks payable to GEAR. Contact Jeremy Knauer at [jknauer@riverridge210.org](mailto:jknauer@riverridge210.org) or Lisa Haas Speer at [lhaas@riverridge210.org](mailto:lhaas@riverridge210.org) if you are interested in coaching. All coaches will have to be approved by GEAR board. If you have multiple children playing baseball/softball, each child receives a \$5 discount.

**Pre-School/Kindergarten T-Ball:** Any child who is 4 before May 1<sup>st</sup> can play. The cost is \$20, which includes a t-shirt. Three games will be held in Elizabeth and 2 in Hanover this year. The season will run for 5 weeks on Fridays. The season will start the last Friday of May.

**1<sup>st</sup> and 2<sup>nd</sup> grade Boys/Girls Coaches pitch:** The purpose of this league is to introduce the fundamentals and rules of baseball/softball. Practices on Tuesday nights and games on Friday. Cost will be \$25, includes T-shirt. Season runs beginning of June till 1<sup>st</sup> week in July.

**3<sup>rd</sup> and 4<sup>th</sup> grade girls' softball:** Games are played in the Carroll County League. There will be between 12-15 games. The cost is \$30. This covers T-shirt and umps.

**3<sup>rd</sup> and 4<sup>th</sup> grade boys' baseball:** This is a traveling league, playing surrounding towns. Nights of the week will vary throughout season, usually 15 games or so are scheduled. No tournaments, only regular season games. Cost is \$30, which includes T-shirt.

**11-12 year old girls softball: (5<sup>th</sup> and 6<sup>th</sup>)** Games are played in the Carroll County League. The cost is \$35.

**11-12 year old boys' baseball (5<sup>th</sup>-6<sup>th</sup>):** Traveling league vs. surrounding towns. The cost is \$35. This includes T-shirt.

**13-15 year old (7<sup>th</sup>, 8<sup>th</sup> and 9<sup>th</sup> grade girls' softball):** Games are played in the Carroll County League. The cost is \$40.

**13-14 year old boys' baseball (7<sup>th</sup>-8<sup>th</sup>):** The regular schedule will play around 15-20 games. The cost is \$40. Jerseys and hats purchased separately at a later time.

**In order to save GEAR money, hats are purchased separately this year. If you already own a blue GEAR hat, you don't need another one. You may purchase a \$6 adjustable cap or an \$18 Flex Fit Hat. Fill out on 3<sup>rd</sup> page of registration forms and circle hat choice.**

**REGISTRATION DEADLINE IS MARCH 11<sup>th</sup>:** In order to schedule the games, all forms must be turned in on time. Any player that missed the deadline will only be allowed on the team if there are open spots left. There will be a \$10 late fee added to those players registered after the deadline. All checks that bounce will be charged a \$15 fee. Return forms to Mr. Knauer at River Ridge.

# Baseball/Softball Registration

## GREATER ELIZABETH ARTS AND RECREATION

### RELEASE OF LIABILITY FOR MINOR PARTICIPANTS

READ BEFORE SIGNING IN CONSIDERATION OF \_\_\_\_\_, my minor child/ward, being allowed to participate in any way in the \_\_\_\_\_ program, related events and G.E.A.R. activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury to my child for the activities involved in these programs is significant, including the potential for permanent, disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist, and,
2. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,
3. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,
4. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE THE other participants, sponsoring agencies, sponsors, advertiser, and if applicable, owners and lesser of premises used to conduct the event, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I, for myself, my spouse, my child and on behalf of my/ours heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasers from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X \_\_\_\_\_ Date Signed: \_\_\_\_\_

(PARENT/GUARDIAN SIGNATURE)(PRINT NAME)

UNDERSTANDING OR RISK

I understand the seriousness of the risks involved in participating in the program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

X \_\_\_\_\_ Date Signed: \_\_\_\_\_

(PARTICIPANT SIGNATURE)(PRINT NAME)

# Baseball/Softball Registration

## GREATER ELIZABETH ARTS AND RECREATION

### EMERGENCY INFORMATION & CONSENT (ONE FOR EACH ATHLETE)

Athlete's Name: \_\_\_\_\_ DOB \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Shirt sz \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

EMAIL \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Family Medical/Insurance:

Carrier: \_\_\_\_\_

Group: \_\_\_\_\_

Policy# \_\_\_\_\_ Group# \_\_\_\_\_

ID# \_\_\_\_\_

Family Physician

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Alt.# \_\_\_\_\_

Allergies(list) \_\_\_\_\_

Serious Medical Condition \_\_\_\_\_

I/we hereby grant consent to any and all health care providers designated by G.E.A.R. to provide my child \_\_\_\_\_ any necessary medical care as a result of any injury/illness. This consent includes, First Aid and transportation to/from health care providers. \_\_\_\_\_

#### IMAGE RELEASE

In consideration of \_\_\_\_\_, my minor child/ward being allowed to participate in any way in the G.E.A.R. Program, related events and activities, the undersigned agrees that such participant's likeness may be photographed or videotaped and that such image may be published in an outlet used to promote or publicize the sports program.

X \_\_\_\_\_

(Parent/Guardian Signature)(Print Name) Date

If you would like to purchase a hat, please indicate below. All adjustable hats are \$6 and flex fit hats are \$18. Adjustable hats are good for any size, flex fit hats come in 4 sizes. Please indicate below by circling and include a separate check to GEAR for hats.

**Adjustable Hat (\$6) Flex Fit (\$18) XS/S S/M M/L L/XL**

