

MIRACLE LEAGUE
ROCKDALE YOUTH BASEBALL ASSOCIATION
SPRING 2010 REGISTRATION

PLEASE MAIL CHECK OR MONEY ORDER AND REGISTRATION FORM TO:
RYBA/MIRACLE LEAGUE

P.O. BOX 82142

CONYERS, GA 30013

MAKE CHECK PAYABLE TO: RYBA MIRACLE LEAGUE

FEE: \$50.00

DEADLINE: FEBRUARY 5, 2010

PLAYER NAME

HOME PHONE

STREET ADDRESS

CITY

ST

ZIP

COUNTY

PARENT/GUARDIAN

WORK/CONTACT NUMBER

AGE _____

BIRTHDAY _____

SCHOOL _____

DIAGNOSIS _____

OTHER SPECIAL NEEDS OR REQUIREMENTS _____

WHEELCHAIR _____

(Y/N)

WALKER _____

(Y/N)

OTHER _____

PLAYER SHIRT SIZE: YOUTH: S M L XL OR ADULT: M L XL 2X

THE MIRACLE LEAGUE AND ROCKDALE YOUTH BASEBALL ASSOCIATION ARE
RELEASED OF ANY LIABILITY FOR INJURY THAT MAY OCCUR WHILE
PARTICIPATING AS A PLAYER OR SPECTATOR DURING THE SEASON. I GIVE
AUTHORIZATION FOR MY CHILD/PLAYER _____ TO
PARTICIPATE. FOR REGISTRATION INFORMATION PLEASE CALL DEBRA CARTER AT
770-784-1786.

PARENT/GUARDIAN SIGNATURE

DATE

RECEIVED BY: _____

DATE: _____

CK#: _____

\$ _____

SEASON STARTS WEEKEND MARCH 13TH

PLEASE NOTE THAT THERE WILL BE A \$10.00 LATE FEE ADDED TO ALL
FORMS POST MARKED AFTER THE DEADLINE DATE.