



# MCAA Registration Form Level \_\_\_\_\_

Baseball \_\_\_\_\_ Softball \_\_\_\_\_ Soccer \_\_\_\_\_ Basketball \_\_\_\_\_

## PLAYER INFORMATION

Last Name: \_\_\_\_\_ First name: \_\_\_\_\_ MI: \_\_\_\_\_

Circle One: Male Female DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: Street: \_\_\_\_\_ Town: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Last Season Played: \_\_\_\_\_

Number of Seasons Played: \_\_\_\_\_ Last Team Played: \_\_\_\_\_

To assist with scheduling, is the player currently participating in any other sport or school team?

Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, what team? \_\_\_\_\_

## PARENT INFORMATION

**Mother** Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Complete the following only if different than above:

Address Street: \_\_\_\_\_ Town: \_\_\_\_\_

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

**Father** Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Complete the following only if different than above:

Address Street: \_\_\_\_\_ Town: \_\_\_\_\_

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

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the MCAA. I also recognize the possibility of physical injury associated with sports and in consideration of the MCAA accepting the registrations for its sports programs and activities. I hereby release, discharge and otherwise indemnify the MCAA and its affiliated organizations and sponsors, their employees and volunteers including the owners of fields and facilities utilized for the programs, against any claims by or on behalf of the registrant as a result of the registrant's participation in the programs and/or being transported to or from same, which transportation I hereby authorize.

I also acknowledge that if the registration is paid using a check, that I have sufficient funds in my checking account and if I do not, that I will be subject to an additional \$25 charge to offset bank fees and administrative costs. I also understand that once my check is denied for any reason that my child will be suspended from play until I satisfy all financial obligations. Additionally, I understand that my unpaid balance carried over from one season or sport program to another will require full satisfaction before I can register my child for the next activity.

## MEDICAL RELEASE

Please list any known medical problems or prohibition player may have: \_\_\_\_\_

Person to notify in case of emergency (other than parents): \_\_\_\_\_ Phone #: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Physician Phone #: \_\_\_\_\_

### Consent for Medical Treatment:

As the parent or legal guardian for the above named player, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of my dependent.

\_\_\_\_\_  
Parent/Guardian Name (Please Print) Parent/Guardian Signature Date

### MCAA Use Only

Payment: Cash: \_\_\_\_\_ Check #: \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ MCAA Initials: \_\_\_\_\_



## Diamond Sport Volunteer Fair Share

Select all positions in which you are interested	Position	Description
	Coach / Assistant Coach	Coach a team during the season
	Director – League or Division	Direct a league, or a division to assist the league director. Facilitate communication to coaches and parents
	SportsManager Scheduler	Maintain teams and game/practice schedules in SportsManager
	Volunteer Coordinator	Collect and maintain volunteer list and completed tasks by working with team parent / coach
	Tournament Director	Organize post season tournament for all star team – includes coordination of volunteers, concessions, fundraising, etc
	Team Parent	Act as liaison between softball directors/coaches and player parents. Facilitate team volunteer opportunities to ensure spaces are filled.
	Team Photographer	Take pictures of games/practices and submit them for placement weekly on the website
	Umpire – Instructional	Umpires for instructional games are volunteer parents – at least one behind the plate, and if possible one in the field.
	Pre Season Field Maintenance	Assist with preparing fields prior to the season (Baseball @ NRR; Softball @ Jacques and Keyes)
	Game Field Maintenance	Drag/Rake field prior to each game. If first game of the day, could also include lining the basepaths and batter's boxes. If last game of day drag/rake field after game.
	Scorebook keeper	Record the game in the scorebook
	Concession	Concession committee to assist the concession director or work concession stand during operating hours
	Fundraising	Assist MCAA Fundraising Director during the season
	Family Fun Day	Work booths or other areas during Family Fun Day
	* Opt Out	I do not wish to volunteer this season - \$50 fee must be paid at time of registration

The MCAA is run purely by volunteers. Without the dedicated commitment of our parent volunteers, the many programs that our children enjoy would not be possible. Please honor your commitment from your Fair Share form.

Child's Name \_\_\_\_\_ Sport \_\_\_\_\_

Parent's Name \_\_\_\_\_ Parent's Signature \_\_\_\_\_

By signing this form I understand that I am expected to complete volunteer activities for this season. If opportunities are provided to me and I do not meet this obligation a \$50 fee\* may be assessed on my next MCAA registration.

\* Effective June 2007 the MCAA implemented an Opt Out option to the Fair Share form. The purpose of this is to allow parents or guardians the opportunity to not volunteer for that season, and instead pay a \$50 contribution. Paying the fee notifies the sport director and coaches that you do not wish to assist with activities other than your player's team responsibilities, which include, but is not limited to, transportation to team activities and team snacks or drinks.