

**AFFTON ATHLETIC ASSOCIATION**  
**P.O. Box 230127 - St. Louis, MO 63123 – 314-843-4207**  
**REGISTRATION AND LIABILITY RELEASE FORM**

Please check one:                     BASEBALL                     SOFTBALL                     CO-ED INSTRUCTIONAL

PLEASE PRINT CLEARLY

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Did you play **Summer** at AAA last year?    Yes    No   Male  Female

Last year's Summer team at AAA: \_\_\_\_\_ Play on same team?    Y    N

Would you be interested in managing a team?    Y    N   Would you be interested in coaching a team?    Y    N

Child's Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Child's Hm. Phone(\_\_\_\_\_) \_\_\_\_\_ School Attending: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Occupation: \_\_\_\_\_ E-mail: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Occupation: \_\_\_\_\_ E-mail: \_\_\_\_\_

**MAY WE GIVE YOUR CHILD'S MANAGER YOUR CELL #'S AND E-MAIL ADDRESSES?**    YES                     NO

Comments or Request: \_\_\_\_\_

**Be advised that your request will be considered, but NOT GUARANTEED**

**IN ADDITION TO THIS REGISTRATION FEE, YOUR MANDATORY PARTICIPATION IN FUND RAISERS AND VOLUNTEER WORK IS REQUIRED TO SUPPORT THIS ORGANIZATION (E.G. RAFFLE TICKETS AND CONCESSION STAND DUTY). – A SEPARATE \$125.00 DEPOSIT CHECK PER CHILD IS REQUIRED AT REGISTRATION; IT WILL BE REFUNDED UPON COMPLETION OF ALL CONCESSION STAND DUTIES.**

I, the undersigned parent or legal guardian of the above-named minor, do voluntarily desire to enroll said minor in the Affton Athletic Association baseball/softball program and thereby agree to be bound by the By-Laws and Rules and Regulations thereof.

I certify that I am cognizant of all the inherent dangers, risks and hazards associated with Baseball/Softball.

In consideration of being permitted to enroll, I hereby voluntarily assume all risks or injury to above minor to my person or property, whether foreseen or unforeseen. I hereby release Affton Athletic Association, its employees, agents, representatives, and associated organizations from any claim, liability, demand or suit of any kind sustained, whether or not caused by the negligence of Affton Athletic Association and hold Affton Athletic Association and associated organizations harmless from any claim, liability, demand or suit arising out of any alleged malfeasance, misfeasance or nonfeasance arising with connection with the Affton Athletic Association baseball/softball program. This release shall be binding upon my heirs, administrators, executors, and assigns.

I represent that I am of lawful age and legally competent to sign this release, that I understand that the terms herein are contractual, and that I have signed this document as my own free agent.

By signing this release, I certify that I have read and fully understand the conditions herein provided. This release shall remain in full force and effect until such time as I notify Affton Athletic Association, in writing, of the cancellation of this release.

**PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_/\_\_\_\_/\_\_\_\_

**FOR AAA OFFICE USE ONLY**

**DOB VERIFIED:**    YES    NO   **DIVISION:** \_\_\_\_\_   **DRAFT POOL:**    Y    N   **PLAYING UP:**    Y    N

**REGISTER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**FEE \$** \_\_\_\_\_   **Mini Rookie \$35 - Co-Ed \$60 – 1<sup>st</sup> Child \$100 – 2<sup>nd</sup> Child \$80 – 3<sup>rd</sup> Child \$60 – 4<sup>th</sup> or more \$40**

**RAFFLE \$**   20.00   **NOT to be added for Mini Rookie**                    **Child #** \_\_\_\_\_ **of** \_\_\_\_\_

**ADM. FEES \$** \_\_\_\_\_ (**\$25 Applied to returning players after 2/13/10**)

**TOTAL \$** \_\_\_\_\_   **PAID BY:** CK # \_\_\_\_\_   **CASH** \_\_\_\_\_   **CREDIT CARD**   MC \_\_\_\_\_   Visa \_\_\_\_\_   Discover \_\_\_\_\_

**# of Raffle Tickets Given** \_\_\_\_\_                    **Last 4 #** \_\_\_\_\_