



P. O. Box 69  
Rayne, LA 70578  
337-334-6644

# 2012 BASEBALL/SOFTBALL REGISTRATION FORM

FOR OFFICE USE ONLY:

Amount Paid \_\_\_\_\_ Ck # / Cash \_\_\_\_\_  
Received by \_\_\_\_\_ Date \_\_\_\_\_  
Entered by \_\_\_\_\_ Date \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone # (337) \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_ M/F \_\_\_\_\_

Lives with: Father / Mother / Both / Other \_\_\_\_\_  
Father's Name \_\_\_\_\_ Cell # \_\_\_\_\_ Wk. Phone \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Cell # \_\_\_\_\_ Wk. Phone \_\_\_\_\_  
Person to notify in emergency \_\_\_\_\_ Telephone # \_\_\_\_\_  
Number of years played \_\_\_\_\_ Last League \_\_\_\_\_ Last Team \_\_\_\_\_

**UNIFORM SIZE (circle one)**

Youth   S (6-8)   M (10-12)   L (14-16)   Adult   S   M   L   XL

I/we, parent or guardian of the above named player, hereby gives approval for participation in any and all Rayne Recreation Department and Pony Baseball, Inc., league activities. I hereby grant permission to managing personnel or other league representatives to authorize and obtain medical care from any licensed physician, hospital, or medical clinic should the player become ill or injured while participating in league activities away from home, or when neither parent nor legal guardian is available to grant authorization for emergency treatment. I assume all risks and hazards incidental to such participation, including transportation to and from activities, and do hereby waive, release, absolve, and indemnify and agree to hold harmless the local league organization, Pony Baseball, Inc., sponsors, supervisors, participants and persons transporting the player to and from the activities, for any claims arising out of injury to the player. I/we parent, guardian, or participant of the above named candidate, do hereby give my/our approval to his/her participation in all activities.

Parental Support

We ask for active participation of all parents in our program. Circle area(s) in which you are willing to help.

Coach  
Asst. Coach  
Umpire

Signed \_\_\_\_\_

This release form must be signed by the parent/guardian and returned to the Rayne Recreation Department along with registration fee on or before deadlines listed below. Registration fee is **\$20.00** per participant. Forms may be mailed in to the above address, or dropped off at City Hall between the hours of 9:00 and 4:00 from Feb. 9 thru March 6. Girls leagues will be determined by their age on January 1, 2012. Boys leagues will be determined by their age on May 1, 2012. **ALL PARTICIPANTS MUST BE REGISTERED BY MARCH 6. NO REGISTRATION WILL BE ACCEPTED AFTER DEADLINE.**

**REGISTRATION DATES**

Feb. 9, 2012	5 – 6:00 PM	Green Room	Feb. 11, 2012	9 – 10:00 AM	Green Room
Feb. 14, 2012	5 – 6:00 PM	Green Room	Feb. 16, 2012	5 – 6:00 PM	Green Room
Feb. 18, 2012	9 – 10:00 AM	Green Room	Feb. 23, 2012	5 – 6:00 PM	Green Room

**TRYOUT DATES AND TIMES**

LEAGUE	DATE	TIME	PLACE
Boy's Pinto (7-8)	March 10	9:00 AM	Gossen Park (Boys Pinto Field)
Girl's Pinto (7-8)	March 10	10:00 AM	Gossen Park (Girls Pinto Field)
Girl's Mustang FP (9-10)	March 10	11:00 AM	Gossen Park (Girls Must. Field)
Boy's Mustang (9-10)	March 10	12:00 PM	Gossen Park (Boys Must. Field)
Boy's Bronco (11-12)	March 10	1:00 PM	Gossen Park (Boy Bronco Field)
Girl's Bronco FP (11-12)	March 10	2:00 PM	Gossen Park (Girl Bronco Field)
Boy/Girl Pony (13-14)	N/A	N/A	No Tryouts Required
Girl's Shetland (5-6)	March 24	9:00 AM	Mauboules Park
Boy's Shetland (5-6)	March 24	10:00 AM	Mauboules Park