



BASEBALL/SOFTBALL 2024 REGISTRATION FORM

PLAYER INFORMATION

Last Name	First Name	Gender	Home Phone	Birth Date	Age
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
Address		City	State	Zip Code	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	
Church (if you regularly attend church, which one?)			Parent's E-Mail Address		
<input type="text"/>			<input type="text"/>		

Jersey Size: (Sizing available during registration/evaluation)

<input type="checkbox"/> Y-XS	<input type="checkbox"/> Y-S	<input type="checkbox"/> Y-M	<input type="checkbox"/> Y-L	<input type="checkbox"/> Y-XL/AS	<input type="checkbox"/> A-M	<input type="checkbox"/> A-L	<input type="checkbox"/> A-XL	<input type="checkbox"/> A-2XL
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Cap/Visor: (Select One)

<input type="checkbox"/> Cap	<input type="checkbox"/> Visor	<input type="checkbox"/> Neither
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Player Information Notes, if any

Carpool Link (only same age/gender)

(Other player must list your child as their carpool link on their registration form also)

Practice Night Exclusion
(If applicable, circle ONE night child CAN'T practice)

<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday
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Evaluation: Fly Balls Grounders Throwing Hitting Running Total

(Shaded areas for league use only)

Registration Fee: Amount Paid Cash Check # (Make checks payable to Outward)

PARENTS/GUARDIAN INFORMATION

Father/Guardian:	<input type="text"/>	Mother/Guardian:	<input type="text"/>
Telephone (Cell):	<input type="text"/>	Telephone (Cell):	<input type="text"/>

I can do one of the following for this player's team:

Coach Asst. Coach Umpire

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PLEASE READ CAREFULLY – SIGNATURE REQUIRED

Does this child have any disabilities, handicaps, present injuries or limitations, allergies, hemophilia, heart conditions, history of respiratory illness or any other significant medical condition?

Yes No If yes, please state condition:

EMERGENCY AUTHORIZATION (Emergency Contact below is hereby authorized to act on my behalf):

In the event my child is injured or becomes ill in Outward activities, and if I, the parent or guardian of the above-named child, am not present to make medical decisions, I hereby authorize the Church, its staff, volunteers including coaches, assistant coaches, umpires or parents of team members to arrange for and consent on my behalf to emergency medical and dental care and treatment. I am responsible for payment of any medical charges or expenses not covered by insurance (if any). In case of emergency, I hereby authorize treatment and/or care at any hospital. If there is an emergency and I cannot be reached, please contact:

Full Name: Phone Number:

AUTHORIZATION AND RELEASE OF LIABILITY

I, the parent or legal guardian of the above-named child, authorize their participation in the Outward Baseball/ Softball Leagues (Outward). I further understand and agree that participation in athletic activities necessarily involves the risk of injury and even death from various causes. On behalf of my child, me and my family, I assume these risks.

In consideration of the privilege of my child's participation in Outward, I hereby release, discharge, hold harmless and indemnify, and covenant not to sue Outward or any participating Church, along with their directors, trustees, deacons, employees, volunteers, insurers, agents and representatives, and all other persons associated with Outward (including without limitation any sponsors, parents, coaches, game or event workers, officials, umpires and volunteers) as to any and all claims of my child, me and other family members for personal injuries suffered, property damage, medical expenses and economic loss arising directly or indirectly out of my child's participation in Outward. This Release of Liability shall be as broadly construed as allowed by law to include all claims and rights that the child, I as parent/guardian and other family members may have. I am a legally responsible parent or legal guardian of my child. I give permission for free use of my child's name and picture in broadcasts, telecasts or written accounts of any Outward event.

I understand participation in Outward may involve strenuous and prolonged physical activity. I agree my child is healthy and able to participate in Outward activities. However, should Outward or its representatives or volunteers determine my child has a physical or mental condition that may affect their ability to safely and appropriately participate in Outward activities, they may determine my child cannot be permitted to participate. I understand and agree that, while Outward desires all children be able to participate, such decisions may have to be made out of concern for the best interests of my child and other participants.

I have reviewed and understand the symptoms and warning signs of concussions and cardiac arrest. (See www.cdc.gov)

My signature below indicates all information provided in this form is true and accurate, and I fully agree to all statements made on the form, including but not limited to the Emergency Authorization and the Authorization and Release of Liability.

Parent/Legal Guardian Signature: Date

Printed Name:

ADDITIONAL ITEMS ORDERED

Baseball Pants Order: Amount paid	<input type="text"/>	Cash	<input type="checkbox"/>	Check #	<input type="text"/>
Size:	<input type="checkbox"/> YXS <input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL	<input type="checkbox"/> YXL <input type="checkbox"/> AS	<input type="checkbox"/> AM	<input type="checkbox"/> AL <input type="checkbox"/> AXL	
Softball Shorts Order: Amount paid	<input type="text"/>	Cash	<input type="checkbox"/>	Check #	<input type="text"/>
Size:	<input type="checkbox"/> YXS <input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL	<input type="checkbox"/> AS <input type="checkbox"/> AM	<input type="checkbox"/> AL	<input type="checkbox"/> AXL	

HOW DO I SIGN UP?

REGISTER ONLINE or BRING or MAIL YOUR REGISTRATION FORM AND FEE AS FOLLOWS:

- Register online at embc.us/outward.
- Registration will be held as follows (see addresses below):

Mt. Lebanon Baptist Church Gymnasium	February 17th	9:00 a.m. – 12:00 p.m.
East Maryville Baptist Church Gymnasium	February 24^h	9:00 a.m. – 12:00 p.m.
- Parents can mail or drop off their form and registration fee (make checks payable to Outward) at East Maryville or Mt. Lebanon Baptist Church offices from 9:00 a.m. to 4:00 p.m. on Monday through Thursday.

East Maryville Baptist Church 1150 Brown School Road Maryville, TN 37804	Mt. Lebanon Baptist Church 3508 Wildwood Road Maryville, TN 37804
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REGISTRATION INFORMATION (Make Checks Payable to Outward):

The early registration cost is \$60 per child. After February 29th, the cost is \$70 per child.
Baseball pants/softball shorts can be ordered at registration or evaluation days for \$15/pair (pay in advance).
Samples of shirts/pants/shorts will be available to determine sizing.

EVALUATION DAY:

Every player (other than Wee-Ball) should attend an evaluation day on Saturday (March 2nd) at the **East Maryville Baptist Church ball fields** at the following times (*age is as of March 1, 2024*):

Wee-Ball (Age 4)	No Evaluation	Ages 7 – 8	10:30 a.m. – 11:00 a.m.
Age 5	9:00 a.m. – 9:45 a.m.	Ages 9 – 10	11:00 p.m. – 11:30 a.m.
Age 6	9:45 a.m. – 10:30 a.m.	Ages 11 – 13	11:30 a.m. – 12:00 p.m.

Child can be evaluated at any time during the above periods, if necessary.

In case of rain, evaluation will be conducted inside the gymnasium.

LEAGUE SCHEDULE:

Practices will begin the **week of April 1st**.

Wee-Ball begins on April 13th.

The first game will be on **April 20th** and will continue through **June 1st**.

The Awards Night will be on **June 8th**.

FOR MORE INFORMATION CALL:

982-4960 or 983-4200

AS AN OUTWARD BASEBALL/SOFTBALL PLAYER, YOU WILL ENJOY:

- A Baseball/Softball Jersey
- Equal Playing Time for each player
- End-of-Year Award for each player
- A Baseball/Softball Cap (if requested)
- Individual Award/Set-Up after each game
- A One-Hour Practice & Game each week

PURPOSE STATEMENT:

The purpose of Outward is to provide an equal opportunity for the development of spiritual and physical attributes in children through team competition.