

## SENIOR BABE RUTH SIGN UP

OCONTO LITTLE LEAGUE, INC.

2024 Sign up

PLAYERS NAME: \_\_\_\_\_

PHONE # : \_\_\_\_\_

PARENT (child lives with): \_\_\_\_\_

PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ AGE : \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

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**FEES : \$50**

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SEND LATE SIGN UP FORM AND MONEY TO:

Joe Bailey  
136 Madison St  
Oconto, WI 54153  
262-617-0368

**Make check out to Oconto Little League**

Late sign ups will only be accepted if there is room on the team

**ALL PLAYERS WILL BE REQUIRED TO WORK AN EIGHT HOUR SHIFT AT THE OCONTO YOUTH TOURNAMENT. JUNE 14-16th.**

**RELEASE** I, as the parent or guardian of the above named child, in consideration of said child's participation in the Oconto Little League program, hereby give my approval to his participation in the baseball program for the coming season. I agree to assume all risks or hazards, of any kind, incidental to the conduct of activities associated with the baseball program. I do further hereby release, absolve, hold harmless and agree to indemnify the organizers, sponsors, coaches, and supervisors of the Oconto Little League, in the case of injury. I hereby waive all claims of any kind or nature that may arise out of or are incidental to said child's participation in the baseball program, against the organizers, sponsors, and supervisors of the Oconto Little League.

Parent signature \_\_\_\_\_ Date \_\_\_\_\_