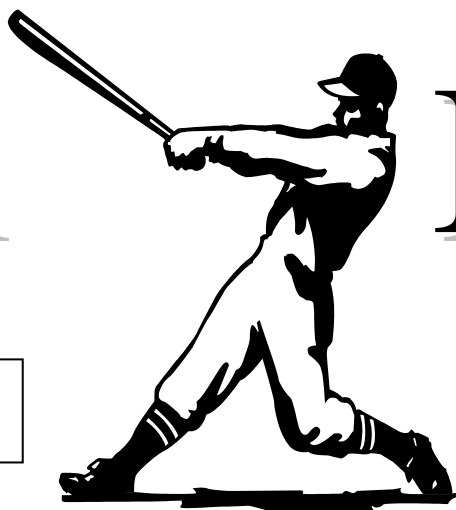


# Fall



# Ball!

Only \$65

Wonder Lake Fall Baseball  
Any Questions? Please Call  
Tom Wedin (815) 363-1221

## REGISTRATION FORM 2011 FALL SEASON

Name \_\_\_\_\_ Birth Date (mm/dd/yy) \_\_\_/\_\_\_/\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Circle One Boy Girl

E-Mail \_\_\_\_\_ Parent Names \_\_\_\_\_

Prior Division \_\_\_\_\_ Prior Team \_\_\_\_\_

Shirt Size Youth S M L XL Adult S M L XL

Division for 2012 Season Born Between

\_\_\_ Pony 05/01/97 – 04/30/99

\_\_\_ Bronco 05/01/99 – 04/30/01

\_\_\_ Mustang 05/01/01 – 04/30/03

\_\_\_ Instructional 05/01/03 – 04/30/05

I, the parent or guardian of the above named child who will be playing on a Wonder Lake Baseball Team hereby give my consent to his/her participation in any and all activities of the league during the current season. I assume all the risks and hazards incidental to the conduct of the activities and transportation to and from the activities. I do further hereby release, absolve, indemnify and hold harmless the Wonder Lake Boys Baseball League, the Organizer, the Sponsor, or any of the supervisors appointed by them. I likewise waive to the extent not covered by Liability Insurance, any claim against any person transporting my child to and from the activities. I will furnish a birth certificate of the above named child upon my request of a League Official. I agree, at the end of the season to return the uniform and other equipment issued to my child in as good condition as when received except for normal wear and tear.

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Visit our website at [www.wlbaseball.org](http://www.wlbaseball.org) for more information!**

Forms must be mailed or turned in by 8/7/11.

Wonder Lake Baseball

P.O. Box 23

Wonder Lake, Il. 60097