

Homer Athletic Club 2010 Season

___ Boys Travel BASEBALL	___ Girls Travel SOFTBALL
___9U ___10U ___11U ___12U ___13U	___14U ___15U ___16U

Child's Name: (Last) _____ (First) _____

Date of Birth: _____

Father's Name: _____ Mother's Name: _____

Mailing address: _____

City, State, Zip: _____

Phone (home) _____ (dad-wk) _____ (mom-wk) _____

(dad-cell) _____ (mom-cell) _____

E-mail address: _____

Emergency Contact: (name) _____ (phone) _____

Last Year League: _____ Last Year Team: _____

Medical Conditions: _____

FEES: Total Travel Fees vary by team – check with your manager on total cost for the year

ROSTER DEPOSIT..... \$225.00

(**Non-Refundable** deposit required to secure roster position)

Included in Deposit

HAC Player Fee \$75.00

Family Participation \$50.00

(to be refunded in the form of sponsor gift certificates)

Additional fees:

Non Resident Fee \$40.00

Total Fee \$ _____

Paid By: ___Cash Check # _____

I / we give my / our approval for participation in any HAC activity during the current season. I / we assume **ALL RISKS AND HAZARDS**, including transportation liabilities; waive, release, absolve, indemnify and agree to hold harmless the HAC or any person or affiliate, from any / all claims rising out of injury or similar.

Parent / Guardian Signature

Date