



OXFORD RECREATIONAL BASEBALL REGISTRATION FORM 2017



P.O. BOX 608
OXFORD, MI 48371

Visit ORBABaseball.com for more Information

Dear Parents and Players:

The 2017 Baseball Season is fast approaching! We will have leagues for all youths who will be 4 to 15 years old by **April 30**.

Registration procedures are as follows:

- 1- All first year players **must** SUBMIT A BIRTH CERTIFICATE (online or mail).
- 2- All players may register online at ORBABaseball.com or by mail using this form with checks payable to "ORBA" at:
P.O. Box 608, Oxford Michigan 48371
- 3- Registration Fees through February 29, 2017 : One Player \$85 Two Players \$160 Three-or-More \$225
- 4- Registration Fees March 1, 2017 through March 26, 2017: One Player \$95 Two Players \$170 Three-or-More \$235

After March 26, 2017 late registration (excluding Pony) will remain ON-LINE only. The registration fee will be \$ 100.00 per player and they will be placed on a team (subject to availability) the buddy system will not apply.

PLEASE FILL OUT THE FOLLOWING INFORMATION USING ONE FORM PER PLAYER

Baseball Divisions Offered:

Uniform Sizes (Check One)

Check One (age child will be on 4-30-17)

Ages 4-6 - T-Ball

Shirt Size

YS

Pant Size

YS

Ages 7-8 - Coach Pitch

YM

YM

Ages 9-10 - First Year Pitch

YL

YL

Ages 11-12 - Babe Ruth

YXL

YXL

Ages 13-15 - Pony

AS

AS

Check if Returning Player

AM

AM

(new players require birth certificate)

AL

AL

Parent willing to manage/coach a team

AXL

AXL

Will your child be playing for any other team during the 2017 ORBA Season? _____ If yes please Explain _____

If you would like to register this player for the ORBA Players Clinic please check this box and include an additional \$30 dollar payment.

Player Name (Print) First _____ Last _____ Email _____

Date of Birth: Month _____ Day _____ Year _____ School _____ Phone _____

Address _____ City _____ Zip Code _____

I/we, the undersigned, agree to let our child play in the **ORBA** Baseball League. I/we also understand and agree that he/she will be assigned to a team according to league rules and agree to follow the ORBA Code of Conduct. I/we also understand that injury may result from my child's participation in this sport and I/we agree not to hold OXFORD RECREATIONAL BASEBALL ASSOCIATION nor its managers and officials responsible for accidents or injuries incurred while playing baseball. I/we also understand that all league equipment will be returned at the end of the season. Players will be able to keep their uniform. **NO REFUNDS EXCEPT FOR MEDICAL REASONS. A \$20.00 FEE WILL BE ASSESSED FOR ALL RETURNED CHECKS.**

Signature of Parent/Guardian _____

BUDDY SYSTEM : To process a Buddy request BOTH players must be on each other's registration form, and be in the same playing division, NO EXCEPTIONS. The Buddy system does not apply to Frozen players.

Buddy Name (Print) _____ Phone _____

Address _____ Zip Code _____