

2024 MADISON HEIGHTS YOUTH BASEBALL ASSOCIATION

Player Name: _____

Date of Birth: _____

These forms must be completely filled out, signed and returned with the required fees in order to participate in the 2024 Baseball program.

Forms attached (Six Sheets Required).

1. This Cover Sheet
2. Registration Form
3. Medical Release Form
4. Release of Liability Waiver
5. Fundraiser Information Sheet
6. Fundraiser Commitment Form

2024 required fees are \$80.00 for the first participant, \$75.00 for the second participant and \$70.00 each for the third or more participants, **if you agree to participate in the MHYBA Fundraiser.**

No one (league age 12 and under) will be allowed to register after midnight on March 01, 2024.

Please read the 2024 Fundraiser Information Sheet completely before you fill out the 2024 Fundraiser Commitment Form.

All first-time participants entering the MHYBA program will be required to furnish a copy of their birth certificate.

No registration fees will be refunded after 03/01/2024

Exceptions can only be authorized by the Executive Board.

I agree to all the above terms in order for my child to participate in the 2024 Madison Heights Youth Baseball Program.

Parent / Guardian Name (**Signature**) _____

Parent / Guardian Name (**Print**) _____

Date Signed: ____/____/2024