



2020 Registration Form

Registration Questions? E-mail registrar@kamloopsminorbaseball.ca



KamloopsBaseball.com



@theKMBA



/KamloopsBaseball

DIVISION Rally Cap (2013/2014/2015) - MUST ALSO COMPLETE ADDITIONAL FORM Tadpole (2011/2012)
 Mosquito (2009/2010) PeeWee (2007/2008) Bantam (2005/2006) Midget (2002/2003/2004)

PLAYER INFORMATION

First Name	Last Name	Address		
_____	_____	_____		
Nickname	Gender	City	Postal	Phone
_____	<input type="checkbox"/> M <input type="checkbox"/> F	_____	_____	_____
Birthdate (mm/dd/yyyy)	E-Mail	T-Shirt Size		
_____	_____	Youth <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL		
Experience	<input type="checkbox"/> Played KMBA last year	<input type="checkbox"/> Didn't play last year, but played KMBA before	Adult <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	
<input type="checkbox"/> Play other BC Minor Assn last year	<input type="checkbox"/> Never played before	<input type="checkbox"/> XL <input type="checkbox"/> XXL		

EMERGENCY CONTACT / MEDICAL INFORMATION

First Name	Last Name	Cell Phone
_____	_____	_____
Allergies / other medical conditions		

COACH VOLUNTEERS

The success of KMBA is driven by the on-field volunteers. We are dedicated to supporting each and every coach who offers to help the kids.

We offer free coaching training by way of clinics, on field help, practice planning, and coach mentoring.

Also, there are many parents who are not able to commit to being a full time coach due to conflicting work and personal schedules. Don't let this be a deterrent, as KMBA can pair you with another coach to ensure full coverage.

Coach or Co-Coach Assistant Coach Parent Helper I am not interested in being a coach at this time

First Name	Last Name	Cell Phone
_____	_____	_____

OTHER INFORMATION

Umpiring (PeeWee Age and up)	Neighbourhood	
<input type="checkbox"/> My child is interested in being an umpire	<input type="checkbox"/> Aberdeen	<input type="checkbox"/> North Kamloops
<input type="checkbox"/> My child was an umpire last year	<input type="checkbox"/> Barnhartvale/Dallas	<input type="checkbox"/> South Kamloops/Sun Rivers
Special Requests	<input type="checkbox"/> Brock	<input type="checkbox"/> Upper Sahali
<i>(No requests are guaranteed)</i>	<input type="checkbox"/> Dufferin/Pineview	<input type="checkbox"/> Valleyview
	<input type="checkbox"/> Heffley Creek/Rayleigh	<input type="checkbox"/> Westsyde
	<input type="checkbox"/> Juniper	<input type="checkbox"/> Other
	<input type="checkbox"/> Lower Sahali	



2020 Registration Form

Registration Questions? E-mail registrar@kamloopsminorbaseball.ca



KamloopsBaseball.com



@theKMBA



/KamloopsBaseball

PARENT/GUARDIAN INFORMATION

Parent / Guardian 1		Parent / Guardian 2	
First Name _____	Last Name _____	First Name _____	Last Name _____
Address _____		Address _____	
City _____	Postal _____	City _____	Postal _____
Home Phone _____	Work Phone _____	Home Phone _____	Work Phone _____
Cell Phone _____	Provider <input type="checkbox"/> Bell <input type="checkbox"/> Rogers <input type="checkbox"/> Fido <input type="checkbox"/> Telus <input type="checkbox"/> Virgin	Cell Phone _____	Provider <input type="checkbox"/> Bell <input type="checkbox"/> Rogers <input type="checkbox"/> Fido <input type="checkbox"/> Telus <input type="checkbox"/> Virgin
E-Mail _____		E-Mail _____	
Relationship to Player <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Other		Relationship to Player <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Other	
This parent / guardian is willing to help as a: <input type="checkbox"/> Umpire <input type="checkbox"/> Volunteer at Large <input type="checkbox"/> Scorekeeping <input type="checkbox"/> Sponsorship <input type="checkbox"/> Concession <input type="checkbox"/> I do not wish to volunteer at this time		This parent / guardian is willing to help as a: <input type="checkbox"/> Umpire <input type="checkbox"/> Volunteer at Large <input type="checkbox"/> Scorekeeping <input type="checkbox"/> Sponsorship <input type="checkbox"/> Concession <input type="checkbox"/> I do not wish to volunteer at this time	

CONSENT

By registering my child(ren) I hereby, for myself, my heirs, executors, administrators, and sponsors, waive and release any and all rights and claims that have or may arise against Kamloops and District Minor Baseball Association, its affiliates, associates, agents, or representatives, for any and all injuries or losses suffered by me or my children while competing in or in connection with the program of said Association. I will also assume responsibility if a coach secures medical assistance where speed is urgent or when parents and/or guardians cannot be contacted. I hereby certify all above information is correct and give consent for my child to take part in the Kamloops and District Minor Baseball Association program and receive any and all information by way of e-mail or other means of communication.

ACKNOWLEDGEMENT

By signing below, I acknowledge I have read and agree to all parts of this registration package as it relates to KMBA and my child(ren).

Name

Signature

Date