



# JUNIOR GIANTS REGISTRATION FORM

<b>Player First Name</b>		<b>Player Last Name</b>		
<b>Address</b>		<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Home Phone</b> (     )     -		<b>E-mail</b>		
<b>Age</b>		<b>Gender</b> <input type="checkbox"/> Female <input type="checkbox"/> Male		
			<b>Primary Language</b> <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other	
<b>Returning Player?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>If yes, how many seasons?</b> _____		
<b>Does this player own a glove?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Would this player be able to play baseball, if not for the Junior Giants Program?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		

## PARENT INFORMATION

**Parent #1**

**Parent #2**

<b>Name</b>	
<b>Phone</b>	
<b>E-mail</b>	
<b>Volunteer?</b>	<input type="checkbox"/> Coach <input type="checkbox"/> Team Parent
<b>Have you coached in the past?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If yes, how many years have you been coaching?</b> _____	

<b>Name</b>	
<b>Phone</b>	
<b>E-mail</b>	
<b>Volunteer?</b>	<input type="checkbox"/> Coach <input type="checkbox"/> Team Parent
<b>Have you coached in the past?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If yes, how many years have you been coaching?</b> _____	

## EMERGENCY CONTACT INFORMATION

<b>First Name</b>	<b>Last Name</b>	<b>Relationship to Player</b>
<b>Cell Phone Number</b> (     )     -		<b>Home Number</b> (     )     -

## Players

### AGREEMENT TO PARTICIPATE IN JUNIOR GIANTS LEAGUE, AND PUBLICITY RELEASE

Participation in all sports and physical activities involves certain inherent risks and regardless of the care taken, it is impossible to ensure the safety of the participant. Baseball is an activity requiring considerable coordination, agility, and a certain level of cardiovascular fitness. It involves many quick bursts of speed and requires being alert to batted balls, thrown balls and thrown bats. Although it is a reasonably safe activity, some elements of risk cannot be eliminated.

A variety of injuries may occur to a baseball participant. Some examples of those injuries are:

1. Minor injuries such as scrapes, bruises, strains and sprains; and
2. More serious injuries such as broken bones, cuts, concussions and eye injuries (including loss of vision).

These, and other injuries, sometime occur in baseball as a result of hazards or accidents such as slips, tripping, catching the ball, being struck by a ball, being struck by a bat, colliding with another player, colliding with the wall, fence or on a base or at home plate, or falling on the field.

To help reduce the likelihood of injury to yourself and to other participants, participants are expected to follow the following rules:

1. All participants are expected to wear proper footwear.
2. All participants are expected to use and properly wear their mitts during play.
3. All participants as catcher are expected to wear a protective mask during play.
4. All participants are expected to avoid swinging when it might endanger another player.
5. All participants are expected to follow all posted safety rules as well as those associated with the rules of baseball.

I agree to follow the preceding safety rules, all posted safety rules, and all rules common to the sport of baseball. Further, I agree to report any unsafe practices, conditions, or equipment to my coach or umpire.

I certify that (1) I possess a sufficient degree of physical fitness to safely participate in baseball, and (2) I understand that I am to discontinue activity at any time I feel undue discomfort or stress.

I have read the preceding information and it has been explained to me. I know, understand and appreciate the risks associated with participation in baseball and I am voluntarily participating in the activity. In doing so, I am assuming all of the inherent risks of the sport. I further understand that in the event of a medical emergency, I will be financially responsible for any expenses involved.

**PUBLICITY RELEASE:** I hereby grant to the San Francisco Giants and the Giants Community Fund, the worldwide and perpetual right and authority to use, reproduce, distribute, broadcast or otherwise transmit, publish and display in whole or in part, my name, photograph, or any other likeness and/or biographical information I may provide, and any statement I have made or may make concerning the Junior Giants League in any and all media now known or hereafter invented, in perpetuity, for the purpose of trade, promotion and/or otherwise without compensation or additional consideration, except where prohibited by law.

X \_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Team Name**

\_\_\_\_\_  
Print Name of Participant

\_\_\_\_\_  
City

\_\_\_\_\_  
Age of Participant

X \_\_\_\_\_  
**Signature of Parent**

\_\_\_\_\_  
Date

\_\_\_\_\_  
E-mail Address

**PARENT / GUARDIAN CONSENT & LIABILITY WAIVER (2012)**

I / We, the undersigned, being the parent(s) and/or legal guardian(s) of \_\_\_\_\_ do hereby grant permission for his/her participation in the "Junior Giants Baseball" program being conducted by Paso Robles Police Activities League, and release Paso Robles PAL, the City of Paso Robles, California PAL, San Francisco Giants Baseball, ATEC Athletic Training Equipment and all their agents, employees, officers thereof, of action, damages and claims in law or equity of every kind whatsoever I / We may now or hereafter have against them arising out of any injury or loss which may occur during this activity.

**I HAVE READ THE ABOVE AND FULLY UNDERSTAND THIS WAIVER.**

\_\_\_\_\_  
Participant Signature

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**MUST BE SIGNED BY PARENT OR GUARDIAN IF PARTICIPANT IS UNDER 18 YEARS OF AGE.**

**MEDICAL RELEASE (2012)**

**AUTHORIZATION FOR ANOTHER TO CONSENT TO TREATMENT OF MINOR**

In the event of injury, I / We undersigned, parent(s) and / or legal guardian(s) of \_\_\_\_\_ do hereby authorize the Paso Robles Police Activities League as agent for the undersigned to consent to any X-ray examination, any anesthetic, medical or surgical diagnosis or treatment and hospital care when deemed advised by and is to be rendered under the general or special supervision of any physician and / or surgeon licensed under the provisions of the or at a hospital. It is understood that this authorization is given in advance of any specific diagnosis, treatment of hospital care being required but is given to provide authority and power on the part of the aforesaid agent to give specific consent to any and all such care which the aforementioned physician in the exercise of his / her best judgment may deem advisable. This authorization shall remain effective as long as your child (as name stated above) participates in the Paso Robles Police Activities League program unless revoked sooner in writing and delivered to the Paso Robles Police Activities League.

**I HAVE READ THE ABOVE AND FULLY UNDERSTAND THIS CONSENT.**

Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**MUST BE SIGNED BY PARENT OR GUARDIAN IF PARTICIPANT IS UNDER 18 YEARS OF AGE**

# Coaches, Managers and Umpires

## AGREEMENT TO PARTICIPATE IN JUNIOR GIANTS LEAGUE PUBLICITY RELEASE AND WAIVER OF LIABILITY

Participation in all sports and physical activities involves certain inherent risks and regardless of the care taken, it is impossible to ensure the safety of the participant. Coaching, playing or otherwise participating in the game of baseball is an activity requiring considerable coordination, agility, and a certain level of cardiovascular fitness. It involves many quick bursts of speed and requires being alert to batted balls, thrown balls and thrown bats. Although it is a reasonably safe activity, some elements of risk cannot be eliminated.

A variety of injuries may occur to a baseball participant. Some examples of those injuries are:

1. Minor injuries such as scrapes, bruises, strains and sprains; and
2. More serious injuries such as broken bones, cuts, concussions and eye injuries (including loss of vision).

These, and other injuries, sometime occur in baseball as a result of hazards or accidents such as slips, tripping, being struck by a ball, being struck by a bat, catching the ball, colliding with a player, colliding with the wall, fence or on a base or at home plate, or falling on the field.

To help reduce the likelihood of injury to yourself and to other participants, participants are expected to follow the following rules:

1. All participants are expected to wear proper footwear.
2. All participants are expected to use and properly wear their mitts during play.
3. All participants as catcher are expected to wear a protective mask during play.
4. All participants are expected to avoid swinging when it might endanger another player.
5. All participants are expected to follow all posted safety rules as well as those associated with the rules of baseball.

I agree to follow the preceding safety rules, all posted safety rules, and all rules common to the sport of baseball. Further, I agree to report any unsafe practices, conditions, or equipment to the local commissioner.

I certify that (1) I possess a sufficient degree of physical fitness to safely participate in baseball, and (2) I understand that I am to discontinue activity at any time I feel undue discomfort or stress.

I have read the preceding information and it has been explained to me. I know, understand and appreciate the risks associated with participation in baseball and I am voluntarily participating in the activity. In doing so, I am assuming all of the inherent risks of the sport. I further understand that in the event of a medical emergency, I will be financially responsible for any expenses involved.

**PUBLICITY RELEASE:** I hereby grant to the San Francisco Giants and the Giants Community Fund, the worldwide and perpetual right and authority to use, reproduce, distribute, broadcast or otherwise transmit, publish and display in whole or in part, my name, photograph, or any other likeness and/or biographical information I may provide, and any statement I have made or may make concerning the Junior Giants League in any and all media now known or hereafter invented, in perpetuity, for the purpose of trade, promotion and/or otherwise without compensation or additional consideration, except where prohibited by law.

**WAIVER OF LIABILITY:** IN CONSIDERATION OF BEING PERMITTED TO COACH, UMPIRE OR OTHERWISE PARTICIPATE IN THE JUNIOR GIANTS BASEBALL LEAGUE, ON BEHALF OF MYSELF, MY FAMILY, MY HEIRS, MY LEGAL REPRESENTATIVES AND MY ASSIGNS, I HEREBY RELEASE THE SAN FRANCISCO GIANTS AND THE GIANTS COMMUNITY FUND AND EACH OF THEIR RESPECTIVE PARTNERS, SHAREHOLDERS, OFFICERS, DIRECTORS, EMPLOYEES AND REPRESENTATIVES FROM ALL ACTIONS, CLAIMS, DEMANDS OR LIABILITY FOR INJURY, LOSS OR DEATH RESULTING FROM MY PARTICIPATION IN THE JUNIOR GIANTS LEAGUE BASEBALL GAMES NOW OR IN THE FUTURE, SUFFERED AS A RESULT OF THE NEGLIGENCE OF THE SAN FRANCISCO GIANTS OR THE GIANTS COMMUNITY FUND OR ANY OF THEIR RESPECTIVE PARTNERS, SHAREHOLDERS, OFFICERS, DIRECTORS, EMPLOYEES OR REPRESENTATIVES.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
City

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
TEAM NAME