Lindsay Lane Christian Academy Youth Sports Commitment/Registration Form

Player's Name:	yer's Name: Parents Names:		
Player's Date of birth: Parent/Guardian's cell ph. nu Home ph.:	mbers: Mom's	Dad's	
Home Address:			
Special Allergies/medical co	nditions:		
in my \$100.00 I am committi with the LLCA Lions in the I fields within Limestone Cour wherever they may be within also agree to represent Christ We are asking you to pay no	ing to allowing my son/ Limestone County Yout hty for ballgames & tou Limestone County (mo well, and to be the salt w so we can go ahead a g baseball with every a gram for your child's age wase call Tadd Mitchell Matt Stockman (LLCA	daughter to play this spri h league and I agree to the rnaments. I agree to have ostly the Den campus and & light of the earth at the and get the children's unif ge group we can if and of group.	ravel to all the different county my child at the practices I the Mane Campus FLC. I ese games and practices. Forms as soon as possible. We nly if we have enough players orts Director) 256-431-4374;
I/We the parents of the above na to participate in any and all activ	med candidate for a positi	on on a youth baseball tean	n, hereby give my/our approval
I/We know that participation in vent all injuries to players and d Lane Christian Academy Athletizers, sponsors, supervisors, part	baseball/softball may resu o hereby waive, release, al ic Department, and Limest icipants and persons trans our child whether the resul-	osolve, indemnify and agree one County Youth Basebal porting my/our child to and	e to hold harmless the Lindsay l/Softball Association, the organ-
Parent(s) or Guardian Signature			
If guardian, what relationship			