



Collinsville Recreational Baseball League (CRBL)
Division of MERBL
Fall Baseball 2021
High School Player Registration Form



Player Name _____ Birthdate _____

Address (1) _____ Shirt Size _____ N/A _____

Address (2) _____ Teammate/Coach Request _____

City/State/Zip _____

Phone _____ Grade Entering in Fall 2021 _____

Email _____ Birth Certificate: Attached _____ On File: _____

Medical Information

Medical condition(s) that we should be aware of: _____

Emergency Contact _____ Phone _____

Relationship to Player _____

Parent/Guardian #1

Name _____

Phone _____

Email _____

Parent/Guardian #2

Name _____

Phone _____

Email _____

FEES

\$1600 per team, or \$150 per player. 12 Game Season Mid August through September

Mail to: Collinsville Recreational Baseball League (CRBL)

Mike Kamp
 115 Briar Ridge, Collinsville, IL 62234
 Email: coachmikekamp@yahoo.com
 Cell: (618)-406-4979

Paid: Cash _____ Check _____

Please write check payable to CRBL

Parental Consent: I/We, the parents/guardians of the above-named minor, hereby give my/our approval to participate in any/all CRBL activities, including transportation to and from the activities. I/We know that participation in baseball or softball may result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold harmless the CRBL organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.

SIGNATURE _____ **DATE** _____