PKERN BABE RUTH LEAGUE. N. O	2 023 B o Hai	County Cal Ripken I aseball Registrati nk Thompson F Park * Montic	on Form ield	BABE RUTH LENG
One Player Per Form	Please!	Check One Please	Bo	y or 🗆 Girl
Player's Name		Date of Birth	:	
<mark>Current Grade in Sch</mark>	ool: (Check	<mark>One)</mark>		
Tee ball 4-6	yrs• 🗌 1 st	□ 2 nd □ 3 rd □ 4 th □ 5	5 th 🗌 6 th 🗌 7 ^t	^h 🗌 8 th 🗌 9 th
Parent/Guardian's N	ame:			
Address:				
		State:		
Email Address:		Telep	none Number:	
contact: Gerald G. S	hepherd (87	score, umpire, assist the 0) 723-2398 or Angela A w the CDC Guideline for	nderson (870)	
Does your child have	<mark>any disabili</mark>	ities, present injuries or	limitations, all	ergies, or heart
<mark>conditions? (Check F</mark>	' <mark>lease) 🗆 Y</mark>	<mark>∕es or □No</mark>		
If yes, please state c	onditions:			
supervising adults of consent medical trea	r volunteered atment. In ca	Il guardians of the partic d parents acting in the ca ase of an emergency and @	apacity of activ I I cannot be re	vity supervisors, to eached, please contact
Parent/Guardian's S	ignature:			_Date:
	<mark>DFΔ</mark> Ι	DLINE March	1 2023	
		gistration-		
	ne	gisti ation-	FNEE	