

# Valley Wheel Baseball

**Directions:**

**Registration Form**

Updated 1/1/10

This registration form, league fee, signed participant release agreement and a copy of your driver's license must be received before your registration can be accepted. Returning players deadline 3/1.

**Return to: VWB c/o Jim Nason, 51 Spence Street, Springfield, MA 01104**

**Please Print Clearly**

**NAME:**

First	Last	Home Phone #
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**ADDRESS:**

Street	City/Town	State	Zip
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Preferred e-mail	Work Phone #	Cell Phone #
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Occupation	Date of Birth	Age on next 6/1	Height	Weight
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Throws (L/R)	Bats (L/R)	New Players: Who do you know in the league? List all.
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Positions	Pitcher	Catcher	1B	2B	SS	3B	LF	CF	RF	Number of Years Played	Experience Form Required
Level of play											
Little League											
Babe Ruth, Pony											
High School											Required
American Legion											Required
Park League											Required
College											Required
Softball											Required
Over Thirty Baseball											Required
Other Baseball											Required
Tri-County Baseball											Required
Semi-Pro											Required
Minor League and above											Required

Please check the positions you have played for each level of play. An "Experience Form" is required for High School and above. Misrepresenting your experience, including omitting experience, will be grounds for rejection of registration or expulsion from the league. VWB is a fun all-experience league. You should have baseball ability. This information is used to ensure a fair draft and parity among teams.

**Returning Players League Fee= \$200: Last Team** \_\_\_\_\_  I would like to return to this team.

**Returning Players Late after 3/1 or Entering the draft; League Fee, Jersey&Belt=\$242**

**For Returning Players to last season team: Experience Form is not required.**  I would like to re-enter the draft.

**New Players League Fee= \$200 Pants=\$22 or \$32 Check payable to: VWB c/o Jim Nason, 51 Spence Street, Springfield, MA**  
(New Player League Fee includes uniform, except pants.) The league fee is non-refundable once the draft is held.

UNIFORM:	S	M	L	XL	XXL
Jersey Size					
Pant Size					

Registration fee must be paid in full at the time of registration to be considered for the draft. I have had sufficient time to read this entire document. I have read it and understood it, and agree to be bound by its terms. I agree to abide by the philosophy and rules of VWB. I certify underpenalty of expulsion that the information I have provided is correct as listed on the VWB player registration and experience form(s).

Signature of Participant	Date
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# Valley Wheel Baseball

## Participant Agreement, Indemnification and Acknowledgement of Risk

In consideration of membership into the Valley Wheel Baseball League (VWB), I hereby agree to conduct myself in a manner which will reflect favorably upon my teammates, fellow competitors, umpires and spectators. I understand that failure to do so may result in my suspension and/or expulsion without reimbursement of any fees I have paid. I understand and agree that I am not entitled to any refund under any circumstances once the draft is held. Complete refunds are due only to those not drafted.

You should consult with a physician before participating in any strenuous exercise.

1. I understand that there are certain risks inherent in my participation in the game of baseball and I assume those risks of my own accord and will indemnify and hold harmless VWB, its members, officers, sponsors or field owners for any injury I may sustain in the course of traveling to and from, or while participating in any VWB activity, or in my use of VWB equipment or facilities, including such claims which allege negligent acts or omissions of VWB.

2. I agree and promise to accept and assume all of the risks in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating or else agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions which could interfere with my safety in this activity, or else I am willing to assume, and bear the costs of, all risks that may be created, directly or indirectly, by any such condition. I also understand the VWB does not provide any insurance for its participants.

4. I certify, under penalty of indefinite long term suspension, that my birth date and age are correctly listed.

Please submit a copy of your driver's license (block out your SS#) or another acceptable proof of age.

I have had sufficient time to read this entire document. I have read it and understand it, and agree to be bound by its terms. I agree to abide by the philosophy and rules of VWB. I certify under penalty of expulsion that the information I have provided is correct as listed on the VWB player registration and experience form(s).

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Signature of Participant

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Printed Name

Date

# Valley Wheel Baseball

## Player Experience Form

**Everyone who has played baseball at high school level or above must complete one of these forms for each league in which you participated.**

Please indicate the name of the league, level of play (high school, college, semi-pro, adult) and where you played (city/town, state):

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Which specific years did you compete in this league? \_\_\_\_\_

Were you a pitcher?

Y / N

If yes, indicate the following:

Were you a starter or reliever? \_\_\_\_\_

Which years or seasons did you pitch? \_\_\_\_\_

During these seasons, approximately how many games did you start? \_\_\_\_\_

Relieve? \_\_\_\_\_

How many innings per game on average did you pitch when you started? \_\_\_\_\_

Relieved? \_\_\_\_\_

When was the last time you pitched competitively? \_\_\_\_\_

Were you a catcher?

Y / N

If yes, indicate the following:

How many years or seasons did you catch? \_\_\_\_\_

During these seasons, approximately how many games did you catch? \_\_\_\_\_

How many innings per game on average did you catch? \_\_\_\_\_

When was the last time you played catcher competitively? \_\_\_\_\_

What other positions did you play?

Please detail your playing experience (not including pitching and catching) in all other positions:

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What part of the batting order did you bat in? \_\_\_\_\_

Indicate any injuries you suffered previously or have now as it relates to your playing ability (such as torn rotator cuff or knee) and the status of that injury. As a reminder, VWB is a fun all-experience league.

This information is used to ensure a fair draft and parity among teams.

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Signature of Participant

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Printed Name

Date