



PLAYER REGISTRATION FORM

Registration is also available online – contact coach for information

PLAYER INFORMATION

Player Name _____

School _____

Division _____

Gender _____ Age _____ Grade _____

Address _____

City _____ Zip Code _____

Home Phone _____ Cell Phone _____

E-Mail _____

PARENT INFORMATION

Parent/Guardian Name _____ Phone: _____

Parent/Guardian Address _____

Parent/Guardian Name _____ Phone: _____

Parent/Guardian Address _____

Emergency Contact _____ Phone _____

Insurance Carrier: _____ ID# _____

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I hereby authorize the coaches, Game Officials, and League Board members to take those

measures deemed necessary for any immediate injuries that may require medical attention during practices and games when the legal guardian is not available. I agree to release TYBL/MSBL, City of Temecula, Murrieta Valley Unified School District, Elsinore Unified School District, Menifee Unified School District, and all venues at which are sanctioned for play by TYBL/MSBL from liabilities that may arise from accident or injury during league related activities.

I also understand that I must commit a minimum of two hours of my time during the season to work as a gym supervisor.

I have read the code of conduct for TYBL/MSBL and I understand and accept what type of behavior is expected of me, and anyone that I bring to games.

I UNDERSTAND THAT LEAGUE FEES ARE NON-REFUNDABLE.

Signature: _____ Date: _____

Insurance Carrier: _____ ID# _____