

# Buckland Recreation Application Form



Player's name: \_\_\_\_\_ Age: \_\_\_\_\_

Player's address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Player's phone: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Father's Name: \_\_\_\_\_

Father's address: \_\_\_\_\_

Cell phone (texting Yes/No): \_\_\_\_\_

Father's home phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's address: \_\_\_\_\_

Cell phone (texting Yes/No) : \_\_\_\_\_

Mother's home phone: \_\_\_\_\_ Email: \_\_\_\_\_

Team on last year: \_\_\_\_\_

Team request for this year; \_\_\_\_\_  
(if possible we will honor)

Memorial Day BBQ:  Both parents can work

One parent can work  Neither parent can work

Early shift pit  Early shift wrap  Late shift wrap  Set up/  
Tear down

Late shift pit  Drive-thru  Shelter house

**Please read and sign:** I grant my son/daughter permission to play tee ball or baseball/softball and release the Buckland Recreation Club, its board members, the coaching staff and instructors from all responsibility pertaining to any accident or injury which may occur.

**PARENT SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Yes, I would like to help with my child's team!