



# B.B.A. CHALLENGER DIVISION



Application to participate in the activities of the Challenger Division, a division of the B.B.A. created for children with disabilities to enjoy the full benefits of baseball in a noncompetitive athletic environment structured to their abilities.

**Players Name** \_\_\_\_\_ **Birth Date** \_\_\_\_\_

**Age** \_\_\_\_\_ **Grade** \_\_\_\_\_ **Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Address** \_\_\_\_\_ **Zip code** \_\_\_\_\_

**Disability** \_\_\_\_\_ **Email** \_\_\_\_\_

**Father/Mother Names** \_\_\_\_\_

**A PARENT/GUARDIAN MUST REMAIN AT THE FIELD AT ALL TIMES.**

T-Shirt Size for Player (**circle one**):

Youth:      Small              Medium              Large              X-Large

Adult:      Small              Medium              Large              X-Large              2XL      3XL

Additional Information:

Is your child able to follow one-step directions? \_\_\_\_\_

Is there any pertinent information we may need to know about your child? \_\_\_\_\_

**\*Please check one age group that you want your child to play in**

? 5-8 yr      ? 9-11 yr      ? 12 and up noncompetitive      ? 12 and up competitive

A **\$30.00 fee (payable to B.B.A)** and completed application is due **before May 7<sup>th</sup>** so that adequate time is allowed for ordering team shirts and hats for the initial game. This fee will pay for a shirt, hat and trophy for each player. Any remaining funds (or donations obtained) will be put towards the annual party at the end of the season. Send applications to **Dave/Jackie Richert, 5766 Scenic View Dr. Bethel Park, PA 15102**. A **limited** number of players will be accepted. B.B.A reserves the right to deny, based on assessment.

### Parent/Guardian Authorization, Release & Agreement

I/We, the parent/guardian of the above named applicant, hereby give my/our approval for his/her participation in the Challenger Division Baseball Season. I understand that a risk for potential injury always exists at recreational activities, I/We therefore will not hold the organizers, volunteers or any other participants responsible for harm that comes to my child while he/she is participating. I/We grant my/our permission to the organizers to use his/her likeness, name, voice and words in any media form **ONLY** for the purpose of advertising or communicating the purpose of the program in order to further support it in the future.

**Signature** of Parent/Guardian \_\_\_\_\_ **Date** \_\_\_\_\_