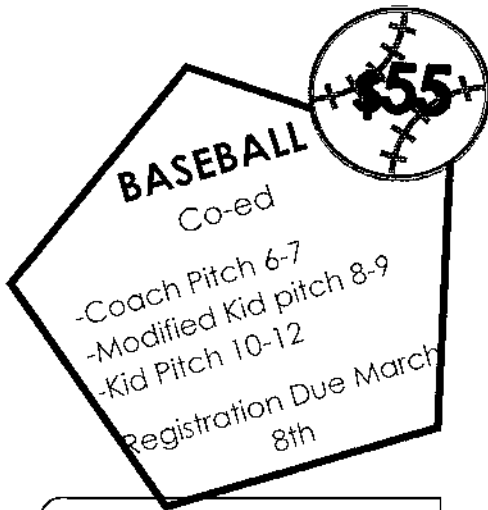


2025 HOLLEY YOUTH BASEBALL

We are now accepting registration for baseball!!



Commissioner Theresa Neale
nealemom@yahoo.com

Register by mail,
or drop payment and form off to the village office:

Holley Joint Youth Baseball Program

c/o Village of Holley

1 Wright St.

Holley, NY 14470

Please make checks payable to Holley Joint Youth Baseball Program and write the players name in the memo line

Player name: _____ DOB: _____ Shirt size: _____

(optional) Player Ethnicity: _____ (this information is used for State Funding of our Program)

Parent/Guardian & Responsible Party Contact Information

Parent/ Guardian Names: _____

Address: _____

Cell Phone _____ Email: _____

Please list any and all medical, emotional, and social concerns:

Please check if you are willing to coach or assist - coach _____ assist _____

Parents/guardians:

Your signature releases all coaches of responsibility in the event of an injury, as well as Holley Youth Recreation (consisting of Towns of Clarendon & and Murray, Village of Holley). Your signature verifies that you or any party with you will not argue or engage in a confrontation with the coaches or officials. If an engagement in the above activity does occur, your removal from the property will be forthcoming. It is the parent or guardian's responsibility to provide transportation to and from the practices and games. Any adult or child not willing to abide by these rules will not be able to participate in these kinds of activities.

Parent/Guardian Signature: _____ Date: _____