

**2019 Raider Baseball Alumni Weekend
Friday, April 5th & Saturday, April 6th
Ed Prescott Field**

Thank you for your support of the Laurens Raider Baseball Alumni game. The 2019 Alumni game will be a full 7 inning game (depending on participation). Please complete the form and liability waiver below.

The cost for participation is \$25.00. The fee will cover the following:

- Alumni Game T-shirt
- Lunch after the game

*Any additional donations will go towards the Raider Baseball program.

Weekend Schedule:

Friday, April 5th:

Raider doubleheader at 5:00 and 7:30 Free admission to Alumni

Saturday, April 6th:

10:00 - Assign teams and batting practice

11:10 - Player and Coach Introductions

11:30 – Game

Lunch will be served after the game. At this time, you will have the opportunity to tour the facility. Immediate family attending the game are welcome to stay and eat lunch with their alumni.

Please print and fill out the registration form provided below and return it by Friday, March 22nd, along with the fee.

***Make all checks and money orders payable to Laurens Raider Baseball, (alumni game on memo line)**

**Mail to: Laurens District 55 High School
5058 Hwy 76 West
Laurens, SC 29360
Attention: Tori Patterson**

Contact Info: Tori Patterson, Head Baseball Coach

(kjpatterson@laurens55.org, eopatterson@laurens55.org)

Phone: 864 -200-8654

Information Sheet

Please make every effort to return this registration/waiver form and payment to Raider Baseball by Friday, March 22, 2019.

NAME _____

ADDRESS _____

EMAIL _____

PHONE _____

POSITIONS PLAYED _____

ARE YOU WILLING TO PITCH DURING THE GAME? YES/NO _____

YEAR OF GRADUATION _____

T-SHIRT SIZE _____

Waiver and Liability Release

In the event I am injured, become ill and/or need medical attention for any reason, Laurens County School District 55 is authorized to arrange transportation to a medical facility and request treatment. I fully understand that I shall be responsible for all cost of transportation, care and/or treatment.

IN WITNESS WHEREOF, the undersigned have voluntarily caused this release of all claims to be executed on the date that appears below.

Signature _____ Date _____