

## **TRI-TOWNSHIP PARK DISTRICT BASEBALL & SOFTBALL REGISTRATION FORM**

First Name                      Last Name                      Date of Birth                      Gender                      Div.                      Medical Information

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Division is determined by the grade your child is **currently registered** in. **PLEASE CIRCLE**

Grade	Age	Division/League	Player	Grade	Age	Division/League
PK-K	4-6	Tee ball		5-6	10-12	Boys A Ball
1-2	6-8	Boys Instructional		5-6	10-12	Girls A Ball
1-2	6-8	Girls Instructional		7-8	12-14	Boys AA Ball
3-4	8-10	Boys Rookie		7-10	12-14	Girls AA Ball
3-4	8-10	Girls Rookie		9-12	14-18	Boys AAA Ball

**\*\*A child can be moved up one division on sign-up day only\*\***

**MUST BE APPROVED BY BASEBALL COMMITTEE**

**PLEASE CIRCLE SHIRT SIZE: YS (6-8) YM (10-12) YL (14-16) AS (34-36) AM (38-40) AL (42-44) AXL (46-48)**

**Verify correct shirt size (Samples at Park Office) – Replacement will be at the parents expense if size was not correct**

PRIMARY CONTACT INFO: \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS/CITY: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

SECONDARY CONTACT INFO: \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS/CITY: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

Request only for Team/Coaches\_\_\_\_\_

Basic Fees:	Tee ball Registration	\$ 65.00
	Registration Fee per Child	\$ 70.00
	Registration Fee for AAA	\$ 90.00/Out of Town \$105.00 per player
	Late Fee Apply beginning on (04/01/2014)	\$ 20.00 per family

Make Checks Payable to: **TRI-TOWNSHIP PARK DISTRICT**

TOTAL FEES \$ \_\_\_\_\_ CASH \_\_\_\_\_ CK# \_\_\_\_\_ CC ending in \_\_\_\_\_

I WANT TO VOLUNTEER: TEAM COACH \_\_\_\_\_ ASSISTANT COACH \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_

**ALL COACHES WILL RECEIVE AN AXL SHIRT UNLESS OTHERWISE SPECIFIED.**

**IF YOU VOLUNTEER, YOU MUST FILL OUT A BACKGROUND CHECK FORM.**

I recognized and acknowledge that there are certain risks of physical injury to participants in the above program(s) and I agree to assume the full risk of any such injuries, damage or loss regardless of severity, which I or my child/ward may sustain as a result of participating in any activities connected to or associated with any such programs(s). I waive and relinquish all claims I or my child/ward may have against TRI-TOWNSHIP PARK DISTRICT and its officers, agents, servants and employees as a result of participating in any of the above program(s). I further agree to indemnify, hold harmless and defend TRI-TOWNSHIP PARK DISTRICT and its officers, agents, servants and employees from any and all claims results from injuries, damages, and losses sustained by me or by my child/ward connected with or in any way associated with the activities of any of the program(s). I have read and fully understand the above program details and waiver and release all claims.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

FOR AA & AAA LEAGUE ONLY-Legion Baseball Player Participation:

*(Circle appropriate response)* My child is / is not a Legion Baseball Player.

*(Circle appropriate response)* My child will / will not be trying out for Legion Baseball.

If my child does make Legion baseball, I understand my child is no longer eligible to play in the Tri-Township Park District Recreational Baseball League and I will notify the coach of my child's team of my child's Legion player status.

I understand that it is my responsibility to notify the Park Office for a refund. \_\_\_\_\_ (Parents initials/Date)