GARNETT RECREATION BASEBALL/SOFTBALL LEAGUES FOR SUMMER 2016

The City of Garnett does reserve the right to request a Birth certificate to verify the ages of any required participant, copies will be made!

DIVISIONS OFFERED AND AGE REQUIREMENTS

BOYS:

T-ball (COED)	Ages 4-6	Age as of May 1, 2017	\$30
Coach Pitch (COED)	Ages 7-8	Age as of May 1, 2017	\$30
10 and Under	Ages 9-10	Age as of May 1, 2017	\$30
12 and Under	Ages 11-12	Age as of May 1, 2017	\$30
13-15 Baseball	Ages 13-15	Age as of May 1, 2017	\$30

GIRLS:

T-ball (COED)		Ages 4-6	Age as of May 1, 2017	\$30
Coach Pitch (CO	(ED)	Ages 7-8	Age as of May 1, 2017	\$30
10 and Under	(Twin Rivers)	Ages 9-10	Age as of January 1, 2017	\$30
12 and Under	(Twin Rivers)	Ages 11-12	Age as of January 1, 2017	\$30
14 and Under	(Twin Rivers)	Ages 13-14	Age as of January 1, 2017	\$30

ALL AGES 9 AND ABOVE WILL BE REQUIRED TO TRAVEL TO NEARBY TOWNS!

ALL FORMS MAY BE PICKED UP AT CITY HALL OR THE GARNETT RECREATION CENTER DURING OPERATING HOURS!

GARNETT RECREATION BASEBALL/SOFTBALL

PLEASE SEE BACK OF THIS FORM FOR AGES/DIVISIONS OFFERED!

Complete this form and return it along with the registration fee to the Garnett Recreation Center during regular office hours (Monday-Friday 5:30 AM-9 AM & 11 AM-7 PM, Saturday 8 AM-NOON, Sunday 1 PM-5 PM). Mail registrations to 131 W. 5th P.O. Box H, Garnett, KS 66032. If there are any questions call City Hall @ 785-448-5496. All registrations must be signed by a parent or legal guardian – NO EXCEPTIONS!

Remember in order for any program to be successful there is always a need for coaches. The City of Garnett appreciates all of the time that the coaches volunteer themselves for to help any program!

Registration Fee: (Refer to Back of Form) Registration Deadline: Monday April 3, 2017

Late fee of \$10 will be added after April 3, 2017

All kids registered on or before April 3, 2016 are guaranteed a spot on a team. After April 3, registrations will be taken to fill out teams. Teams will be capped at 14 players. Once teams are full you will be placed on a waiting list until there are enough to form a new team or split a current team. Please turn your registration in on time to guarantee your spot.

Name of Child _____ Email Address ____

Street Address	City	Zip Code		
Street Address Parent Cell	Phone	Parent Work Phone		
Sex: Male / Female (Circle One) Date of	Birth:/ Ag	ee: (Refer to back of Form)		
Please list all siblings: Please list any conflicts:				
Please list any medical conditions:				
Would you like to coach a team: () Yes Would you be willing to assist: () Yes Would you or your employer be interested	() No	Yes () No Name of business		
Parent's Name:	Phone:			
T-Shirt Size: (Circle One) YXS YS	YM YL AS AM	AL AXL		
absence from attendance of baseball/softball at ar Recreation Staff, has my consent to authorize treanecessary. I, the undersigned, do hereby acknowled knowledge of the risks involved and I hereby agreeoaches, officials, volunteers, and team sponsors Furthermore, I do understand that accide responsibility for any and all expenses resulting f baseball/softball.	atment for this child by a doctor atment for this child by a doctor alge that I have given my child go ee to assume those risks and to free from liability for any injur- ent insurance is NOT provided from any accidents or injuries s	aken to an emergency room or medical care facility in my n, my child's team coaches, or any member of the Garnett or(s) and/or medical personnel which may be deemed permission to participate in baseball/softball with full o hold the City of Garnett, all of their officers, employees, ry, harm or complication of any kind. by the City of Garnett, and I hereby agree to assume full suffered by the above named child while participating in ace, color, national origin, or handicap in the operation of any		
Signature				
Relationship Date	<u> </u>			

Go to WWW.RAINEDOUT.COM and search for City of Garnett Recreation, and receive texts about Garnett Recreation program updates and game cancellations.