

Elkton City-Todd County Park

YOUTH T-BALL/BASEBALL/SOFTBALL REGISTRATION FORM

Due: 04-19-2019

PLAYER INFORMATION

Participant's Name: _____ D.O.B _____

Parent's Name: _____ Home Phone: _____

Cell Phone: _____ Alternate Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Gender: Male Female

List any medical problems player has: _____

What will your child's age be on: 05-01-19 (male) _____ Years old 05-01-19 (female) _____ Years old
old

01-01-19 (Female Age's 9-12) _____ Years old

T-ball is ages 3-4 & 5-6, Machine pitch is ages 7-8 (Girls & Boys), Little League is ages 9-10 & 11-12, Girls fast pitch softball is ages 9-10 & 11-12

Fees: \$50.00 for 1 player, \$45.00 each for 2 players, \$40.00 each for 3 or more players.

If you are paying for siblings, please turn in forms together.

Jersey size for child: Please select ONLY 1 size

_____ Youth Small (6-8)

_____ Youth Medium (10-12)

_____ Youth Large (14-16)

_____ Adult Small

_____ Adult Medium

_____ Adult Large

_____ Adult XL

The Elkton City-Todd County Park Youth T-ball/Baseball/Softball League is a volunteer league that is dependent on parents volunteering to coach. Please indicate below if you would be willing to help coach your child's team or be and assistant coach. If the league is unable to obtain coaches you may be issued a refund.

Head Coach: Yes: _____ No: _____ Assistant Coach: Yes: _____ No: _____

Shirt Size _____

I/We the parents of the above child, who is participating in the Elkton City-Todd County Park T-Ball/Baseball/Softball program, hereby give my approval to his/her participation in any and all of the activities of the program. I/We assume all risk and hazards incidental to the conduct of the activities. I/We do further hereby release, absolve indemnity and hold harmless the Elkton City-Todd County Park, the organizers, sponsors, and supervisors. In case of injury to my child likewise waive all claims against the organizers, sponsors, and supervisors appointed to them. I further agree to indemnify the City of Elkton and Todd County against any claims which may be asserted by the above child, whether such claim is asserted now or in the future. It is understood that by completing this application the undersigned parent or guardian acknowledges that the above participant is physically fit to play T-Ball/Baseball/Softball and will abide by the rules and activities set forth by the Elkton City-Todd County Park Commission.

Signature: _____

(Parent of Guardian)

Return to:

Elkton City-Todd County Park, P.O. Box 22, Elkton, KY 42220

There is also a drop box at the Park Office. Forms without payment by the deadline listed above will be returned.

If you would like to be a sponsor for your child team the cost will be \$250.00 per team _____