



West Union Parks and Recreation Baseball Registration Form

Deadline: This form and fee must be returned by March 3, 2017. **A LATE FEE OF \$10 WILL BE ASSESSED AFTER THAT DATE. NO REGISTRATIONS WILL BE ACCEPTED AFTER 4/3/17 UNLESS NEW TO THE COMMUNITY.**

Entry Fee: Levels are determined by **last grade completed**. Please be aware that due to limited diamonds, some games and practices may be held in Hawkeye and Fayette. If you have more than one child participating in the same activity, there will be a \$5.00 discount for each additional child. Example: If you have three children participating, the total cost would be \$50.00---\$20.00 + \$15.00 + \$15.00 = \$50. This is a savings of \$10 per activity.

Changes: Please provide the birthdate on the form below. We have eliminated preschool from the t-ball league and are now making t-ball more like regular baseball/softball. We will be teaching the games with strikes and outs.

Send to: Mail entries to: West Union Parks and Recreation, PO Box 151, West Union IA 52175. Or this form can be returned to the school the child attends.

Questions: Email Kathy Guyer at wuparkandrec@gmail.com or call 563-380-8496.

T-Ball	Pitching Machine	Minors	Majors	Juniors
K	Grades 1-2	Grades 3-4	Ages 11-12	Ages 13-14
\$35	\$40	\$45	\$50	\$55
			Birthdate _____	Birthdate _____

Name: _____ ADDRESS: _____ CITY: _____ ZIP: _____

GRADE: _____ BIRTH DATE: _____ PHONE: _____ SHIRT SIZE: _____ (Adult or Youth)

EMERGENCY CONTACT: _____ PHONE: _____

Email Address _____ (Only used for announcements)

2nd Email Address _____ (Only used for announcements)

_____ Is your child planning on participating on the **West Union Swim Team**? Every effort will be made to avoid scheduling games on swim meet days but cannot be guaranteed.

Note: Requests will not be accepted for specific teams. Players will be randomly assigned to teams. Once players are assigned, they must stay on that team.

Please indicate if you would be willing to help coach this activity for your child.

- _____ Yes, I am willing to help coach or work concessions. Please circle preference.
- _____ No, I am not able to help at this time but keep me in mind for future activities.
- _____ No, I am not able to coach.

Waiver form: Program registrants assume full responsibility for any risk, implicit or direct, by participation in said activity or facility. I, parent/guardian of the entrant listed above, waive and release any and all rights and claims for damages against the program listed above, its coaches, the City of West Union and its Parks and Rec. Department/Board and its employees, other sponsors, coaches and volunteers, for any and all injuries that may be suffered by the entrant listed above in connection with the above registered activity.

Parent/Guardian Signature _____ Date _____
Parent/Guardian Printed Name _____