

2020 YOUTH BASEBALL



The City of Fircrest
Parks and Recreation

Phone: 253-564-8177

Fax: 253-238-4173

Email: cwells@cityoffircrest.net

CIRCLE ONE

COED T-BALL (K/1)

COACH PITCH (2/3)

GIRLS

4 / 5TH GRADE
MODIFIED FASTPITCH

BOYS

4 / 5TH GRADE
INCREDIBALL

Name: _____

Grade : _____ **Age:** _____ **M or F** _____ **Phone:** _____

Parents Name: _____ **E-mail:** _____

Address: _____ **City:** _____ **ZIP:** _____

Youth T-Shirt Size: **YS**__ (size 6-8) **YM**__ (size 10-12) **YL**__ (size 14-16)

Adult T-Shirt Size: **AS**__ **AM**__ **AL**__ **AXL**__ **AXXL**__

(Please order correct size as shirts will not be exchanged)

I want to Coach **Preferred Coach or Friend** _____

***Note:** 4/5th grade Boys and Girls teams will be competing against Metro Parks teams. Practices will begin in April and games in early May.

REFUND POLICY: You may only request a refund within two weeks of payment. After two weeks no refunds will be given. There will be a \$10 administrative fee for each refund processed.

PARENT/GUARDIAN AGREEMENT:

I assume all risks and hazards of my child participating in your indoor soccer or baseball programs and release from responsibility any persons providing transportation to and from activities. In cases of injury, I do hereby waive all claims and legal actions, financial or otherwise, against the city of Fircrest, it's elected officials and employees, the organizers, supervisor, coach or any volunteer connected with the program. In absence of my signature, payment and fees and participation in the program shall constitute acceptance of the conditions set forth in the release. I also grant full permission to use any photographs, videotapes, motion pictures, recordings or any other record of this program for promotional and documentary purposes.

By signing below, I acknowledge I have read, understand and agree with the concussion protocol outlined on the back or attached to the registration form.

Parent/Guardian Signature: _____

Cost :

\$40 Fircrest Residents (K-5th grade)

\$65 Non-Residents (K-3rd Grade)

\$70 Non Residents (4-5th Grade)

Date Received: _____ **Receipt #** _____

For official use: Amount Paid: _____ Amount Due: _____

REGISTRATION

RESIDENTS:

JAN 27 - MARCH 2

Non-Residents :
Feb 10- March 2