Rockville 2024 Summer Ball Program

REGISTRATION FORM

Child's Name: _____ DOB _____ Age: _____

Parent(s) Name: _____

Address: _____

Phone: _____ Email: _____

REGISTER

- ☐ **T-Ball:** ages 3-5 (work on developing game skills) Tuesday evenings $25
- ☐ **Pitch Ball:** ages 5-7 (work on developing game strategy) Tuesday evenings $25

SHIRT SIZE

Youth:	☐ Small	☐ Medium	☐ Large
Adult:	☐ Small	☐ Medium	☐ Large

COACH or ASSISTANT COACH Volunteers Needed

T-Ball:	☐ Coach	☐ Assistant Coach
Pitch Ball:	☐ Coach	☐ Assistant Coach

The ball season starts the first week after the school year ends. The team coach will contact players with the season schedule and the ball field location.

Media Permission:

- ☐ I **grant** permission for my child to participate in these activities: media interview(s), videotaped, photographed, name to appear in print and/or websites.
- ☐ I **do not** want my child to participate in media interview(s), videotaped, photographed, name to appear in print and/or websites.

By my signature I hereby give permission for my child to participate in the Rockville Youth Program. I acknowledge that I will not hold the Rockville Youth League or any member of its town, coaches or staff, liable for any injury that my child may receive while participating in the program. I also give permission to have my child receive treatment if any injury should occur to him/her while participating in the program, when I as a parent am not available and cannot be reached.

Parent or Guardian Signature _____ **Date** _____

Please make checks payable to: ***City of Rockville***

Forms can be dropped off at Rockville City Hall. **NOTE: sign up deadline is April 12, 2024**

For Office Use: Total Fee Paid: _____ Check #: _____ Date: _____ R#: _____ 101-45120-34790