CITY OF HEADLAND

2014 T-BALL, BASEBALL & SOFTBALL REGISTRATION FORM

REGISTER *January 27th – February 7th @ CITY HALL*

8:00AM – 4:30PM

Ages 4-15 * *$20.00 for T-Ball* * *$30.00 for Baseball/Softball*

NOTE: If more than two children register from the same family, additional child/children play free.

PARENT NAME(S): _____

CHILD'S NAME: _____

CHILD'S DATE OF BIRTH: _____ **GENDER: M F**

(MUST BE AGE 4 AS OF MAY 1st***)***

ADDRESS: _____

PHONE NUMBER: (_____) _____-_____

I am interested in being a head coach

YES NO

I have insurance on my participating child/children that will be in effect for the entire season with the following insurance company:

_____ **Group #**_____

JERSEY SIZE

(Please circle size needed)

(Y – Youth)

YXS YS YM YL

(A – Adult)

AS AM AL AXL AXXL AXXXL

******THE CHILD MUST PROVIDE PANTS & SOCKS******

IMPORTANT DATES

Thursday, February 13th @6:00PM

Coach's Meeting *(MANDATORY)* in City Hall's Council Chambers

Monday, February 17th @ 6:00PM

TRYOUTS @ Ballpark Complex *(Ages 7- 8, 9-10)*

Tuesday, February 18th @ 6:00PM

TRYOUTS @ Ballpark Complex *(Ages 11-12)*

Opening Day will be March 29th.

Games begin on March 31st.

****** Ages 4-6and 13-14 DO NOT have to tryout/attend the draft - Coaches will contact you with information. ******

******Girls (Ages 7-8) will be automatically signed up for softball unless otherwise specified.******

I understand the City of Headland is not liable for any injury incurred while my child/children are participating in this city recreational program.

_____ _____

Signature of Parent or Legal Guardian ***Date***

PLEASE RETURN REGISTRATION FORM TO CITY HALL – NOT TO SCHOOL OR DAYCARE!

Amount Paid: $_____ **Receipt Number:** _____ **CASH CHECK**