

# VILLAGE OF FALL CREEK SUMMER RECREATION PROGRAM

## 2018 Registration Form

**REGISTRATION DAY: Wed, Jan 31 (5-8PM) and Sat, Feb 3rd (9-Noon) at Village Hall**

- ☺ Children from Kindergarten to 8th Grade are eligible to participate.
- ☺ Must provide own transportation to away games.
- ☺ Coaches will contact team members with practice/game schedule.

**PLAYER**

Name (Last, First) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Current Grade ('17-18 schl yr) \_\_\_\_\_  Boy  Girl

Allergies or Medications Needed: \_\_\_\_\_

**TEAM**

(Grade/Age during current school year)

T-BALL	COACH-PITCH	BASEBALL	SOFTBALL
Boys & Girls	Boys	Boys	Girls
June & July	Mid April - June	Mid April - June	8U-12U: Mid April - June 14U-16U: Mid May - July
<input type="checkbox"/> K + 1st Grade Intramural Boys & Girls mixed	<input type="checkbox"/> 2nd Grade	<input type="checkbox"/> 3rd Grade <input type="checkbox"/> 4th Grade <input type="checkbox"/> 5th Grade <input type="checkbox"/> 6th Grade <input type="checkbox"/> 7th Grade <input type="checkbox"/> 8th Grade	<input type="checkbox"/> 8U: 7+8 yr olds <input type="checkbox"/> 10U: 9+10 yr olds <input type="checkbox"/> 12U: 11+12 yr olds <input type="checkbox"/> 14U: 13+14 yr olds <input type="checkbox"/> 16U: 15+16 yr olds

**BASEBALL or SOFTBALL:** Interested in participating in 3-5 Tournaments? (add'l fee to be determined)

**T-SHIRT**

Team T-shirt and cap/visor are provided for each child. Must provide own pants & socks.

<input type="checkbox"/> Youth-S	<input type="checkbox"/> Adult-S	<input type="checkbox"/> Adult-XL
<input type="checkbox"/> Youth-M	<input type="checkbox"/> Adult-M	<input type="checkbox"/> Adult-XXL
<input type="checkbox"/> Youth-L	<input type="checkbox"/> Adult-L	

**FEES**

Check payable to VILLAGE OF FALL CREEK. (Fees will be refunded if not enough registrants to make a team.)

**T-Ball or Pitch-Ball Teams**

\$30 per individual

\$50 per family

(2 or more individuals on these teams)

**Baseball or Softball Teams**

\$40 per individual

\$70 per family

(2 or more on any teams)

**PARENT/GUARDIAN**

Primary Contact _____	Phone _____
Email _____	Relationship to Player _____
Secondary Contact _____	Phone _____
Interested in Coaching? _____	Head Coach <input type="checkbox"/> Assistant Coach <input type="checkbox"/>

**Parental Authorization and Medical Release:** I, the parent or guardian of the above named child, hereby give approval for participation in any and all Summer Recreation Program activities sponsored by the Village of Fall Creek. I hereby grant permission to managing personnel or other program representatives to authorize and obtain medical care from a licensed physician, hospital, or clinic should the player become ill or injured when neither parent nor guardian is available to grant authorization for medical treatment. I assume all risks and hazards incidental to participation, including transportation to and from activities, for any claim arising out of an injury to the player. I do further hereby release, absolve, indemnify and hold harmless the Fall Creek Summer Recreation Program, the organizers, sponsors, any or all of them.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Any questions: Contact Brad Ceranski @ 715-297-5323**

Completed registration form and payment can be dropped off at Village Hall (Mon-Fri 8:00am-4:30pm) or mailed to:

VILLAGE OF FALL CREEK - 122 E LINCOLN AVE - PO BOX 156 - FALL CREEK, WI 54742

**Registration & concussion forms MUST be submitted before child can participate in PRACTICES or GAMES.**

<b>Office Use Only</b>	Amt Pd _____	<input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Ind <input type="checkbox"/> Fam <input type="checkbox"/> Concussion Form
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