

VILLAGE OF FALL CREEK SUMMER REC REGISTRATION FORM

REGISTRATION DAY: Wed, Jan 16, 2019 (5-8PM) and Sat, Jan 19, 2019 (9-Noon) at Village Hall

☺ Must provide own transportation to away games.

☺ Coaches will contact team members with practice/game schedule.

PLAYER	
Player Name (Last, First)	_____
Mailing Address	_____
Date of Birth	_____
<input type="checkbox"/> Boy <input type="checkbox"/> Girl	
Allergies or Medications Needed:	_____

PARENT/GUARDIAN	
Primary Guardian	_____
Relationship to Player	_____
Primary Guardian Phone	_____
Primary Guardian Email	_____
Secondary Contact	_____
Secondary Contact Phone	_____

Parent interested in coaching? Name: _____

Head Coach Assistant Coach

Check box if would like to purchase a coaching shirt (Pay later)

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 _____

TEAM: Player Current Grade (2018-2019 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+HS: Mid May - July
<input type="checkbox"/> (A) 4K	<input type="checkbox"/> (C) 1st Grade	<input type="checkbox"/> (E) 3rd Grade	<input type="checkbox"/> (K) 8U: 7+8 yrs
<input type="checkbox"/> (B) Kndrgrtn	<input type="checkbox"/> (D) 2nd Grade	<input type="checkbox"/> (F) 4th Grade	<input type="checkbox"/> (L) 10U: 9+10 yrs
Intramural		<input type="checkbox"/> (G) 5th Grade	<input type="checkbox"/> (M) 12U: 11+12 yrs
Boys & Girls mixed		<input type="checkbox"/> (H) 6th Grade	<input type="checkbox"/> (N) 14U: 13+14 yrs
		<input type="checkbox"/> (I) 7th Grade	<input type="checkbox"/> (O) HS: 15-18 yrs
		<input type="checkbox"/> (J) 8th Grade	
T-Ball or Pitch-Ball Teams		Baseball or Softball Teams	
Check payable to VILLAGE OF FALL CREEK		Check payable to VILLAGE OF FALL CREEK	
<input type="checkbox"/> \$30 per individual		<input type="checkbox"/> \$40 per individual	
<input type="checkbox"/> \$50 per family		<input type="checkbox"/> \$70 per family	
(2 or more on these teams)		(2 or more on these teams)	
Family spans T-Ball/P-Ball & Base/Softball		Interested in participating in 3-5 tournaments? <input type="checkbox"/>	
<input type="checkbox"/> \$60 per family		(add'l fee to be determined)	

T-SHIRT			
Team T-shirt and cap/visor are provided. Must provide own pants & socks.			
<input type="checkbox"/> (A) Youth-S	<input type="checkbox"/> (C) Youth-L	<input type="checkbox"/> (E) Adult-M	<input type="checkbox"/> (G) Adult-XL
<input type="checkbox"/> (B) Youth-M	<input type="checkbox"/> (D) Adult-S	<input type="checkbox"/> (F) Adult-L	<input type="checkbox"/> (H) Adult-XXL

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

Form and payment can be dropped off at Village Hall (Mon-Fri 9AM - 4 PM) or mailed to:

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

Forms MUST be submitted before child can participate in PRACTICES or GAMES.

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