

EAGLE LAKE T-BALL REGISTRATION

PLEASE MAIL/BRING COMPLETED FORMS AND FEES TO

Eagle Lake City Offices – 705 Parkway Ave. Eagle Lake, MN 56024

Make checks payable to: Eagle Lake T-Ball

REGISTRATIONS DUE BY 5/11/2018

PLAYER'S NAME _____ AGE: _____ BIRTH DATE _____

CURRENT GRADE: ___ PRE K ___ K ___ 1ST GRADE ___ 2ND GRADE (check one)

ADDRESS: _____ CITY: _____

PARENT/GUARDIAN _____ HOME PHONE _____ CELL # _____

EMAIL _____

PARENT/GUARDIAN _____ HOME PHONE _____ CELL# _____

AGE REQUIREMENTS AND FEES:

T-BALL – BOYS & GIRLS WHO ARE AGES - 4, 5, 6, & 7

\$20 INCLUDES: T-SHIRT Please select Youth Shirt Size ___ S ___ M ___ L

Season will run May 19th thru July 7th

Saturday mornings –(optional weekday practices – by coach) - May through July

Eagle Lake School Diamond/City Park

– NO T-BALL SCHEDULED MAY 26th Due to HOLIDAY -

We as parents/guardians understand this program is a youth baseball program and as such involves certain risks of injury to the participants. Having in mind the risk of injury, we as parents/guardians do hereby agree to assume responsibility for any illness, injury or injuries sustained to _____ (player's name) while practicing, playing, being transported or involved in activities under the jurisdiction of EAGLE LAKE T-BALL . WE ALSO AGREE TO INDEMNIFY AND HOLD HARMLESS EAGLE LAKE T-BALL, THE MANKATO PUBLIC AND PAROCIAL SCHOOL SYSTEMS AND THE CITY OF EAGLE LAKE FROM ANY AND ALL DAMAGES WHILE PARTICIPATING IN YOUTH BASEBALL.

ANY MEDICAL CONDITION WE SHOULD BE AWARE OF: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

EMERGENCY CONTACT NAME: _____ PHONE: _____

EAGLE LAKE T-BALL IS RUN BY VOLUNTEERS - TO MAKE THIS SEASON SUCCESSFUL WE NEED YOUR HELP WITH COACHING AND ORGANIZING TEAM ACTIVITIES!

IF INTERESTED IN COACHING _____ PHONE: _____

IF INTERESTED IN ORGANIZING TEAM ACTIVITIES _____ PHONE: _____