

Scott City Youth League Registration

Fees: T-Ball - \$50 7-8 yrs - \$60 9-12 yrs - \$70 13-15 yrs - \$80 16-19 yrs - \$90

Family discount: \$10 discount per each additional sibling

T-Ball: May 1st cutoff **Boys 7+:** May 1st cutoff **Girls 7+:** January 1st cutoff

Check the appropriate age group:

<input type="checkbox"/> T-Ball Boys 4-6 (COED)	<input type="checkbox"/> T-Ball Girls 4-6 (COED)
<input type="checkbox"/> Boys 7-8 (Machine)	<input type="checkbox"/> Girls 7-8 (Machine)
<input type="checkbox"/> Boys 9-10	<input type="checkbox"/> Girls 9-10
<input type="checkbox"/> Boys 11-12	<input type="checkbox"/> Girls 11-12
<input type="checkbox"/> Boys 13-15	<input type="checkbox"/> Girls 13-14
<input type="checkbox"/> Boys 16-19	

Players will play in their allotted age group unless approved by the Park Director. No exceptions

Child's Name: _____

Child's Address: _____

Birthday: ____/____/____ Current Age: _____ Current Grade: _____

Current School Attending: _____

Parent's Name(s): _____

Parent's Phone Number: _____ Parent's Email: _____

Uniform Size (Circle One): YS YM YL AS AM AL AXL

Parent Shirts (\$15 each) Quantity: _____ Size(s): _____ Amount: \$ _____

Parent Hat/Visor (\$10 each) Quantity: _____ Size(s): A or Y Amount: \$ _____

Only HEAD coaches are supplied uniform and hat

Amount to be paid: \$ _____ Amount Paid: \$ _____ Birth Certificate Attached: _____

Signature of Park Director: _____

The undersigned parent/guardian of the above named child hereby consents to the child's participation of all practice, games, or other activities of the summer youth league season. The undersigned assumes all risk and hazards incidental to such sports and activities, including transportation to and from such activities and sports events. The undersigned hereby releases, absolves, and agrees to hold harmless the City of Scott City, the Scott City Parks and Recreation Department, all sponsors, organizers, coaches, participants, and persons transporting my child, from all injuries and loss except to the extent and in the amount of any liability, medical or accidental insurance, if any, in effect, and provide coverage for the above named child. I also give consent to the use of my photograph or video recording of my child or family in the future to the Scott City Parks and Recreation Department.

Parent / Guardian Signature: _____ Date: _____