

PLAISTOW RECREATION BASEBALL

Questions? Please contact Christina Cruz – Recreation Director at 382-5200 ext 18

APPLICATION AND \$ _____ REGISTRATION FEE
DUE BY JANUARY 15, 2015



SCATTERBALL	AGE 4/PRE-SCHOOL	\$25.00
TEE-BALL	AGE 5/KINDERGARTEN	\$50.00
FARM LEAGUE	AGES 6 – 7	\$75.00
MINOR LEAGUE	AGES 8-11	\$100.00
MAJOR LEAGUE	AGES 12	\$100.00

Child's Name _____ DOB _____

Baseball Player Age as of 5/1/15 _____ Grade as of January 01, 2015 _____

Address _____ Phone _____

Parent/Guardian Name _____ Phone _____

Email _____

Parent/Guardian Name _____ Phone _____

Email _____

Please list any medications/allergies _____

Physicians Name _____ Phone _____

Dentist Name _____ Phone _____

I hereby give permission for my child to participate in the Plaistow Recreation Baseball Program. I assume all rights and hazards incidental to participation and hereby release and absolve the Town of Plaistow Recreation Department, all employees and volunteers for any damage my child may suffer. In case of emergency by authorization of my signature below, I hereby allow the Town of Plaistow Recreation Department, employee/volunteer to administer first aid and make arrangements for emergency transportation to a medical facility for treatment.

Signature Parent/Guardian _____ Date _____

If you are interested in volunteering, please check the appropriate place:

Coaching _____ Asst. Coaching _____ Team Parent _____ Concession Stand _____