

# Lake Alliance Parks and Recreation

319 N. Nelson St. | PO Box 488 | Potterville, MI 48876

Phone: (517) 645-7641 | Fax: (517) 645-7810 | Website: [www.pottervillemi.org/parksrec](http://www.pottervillemi.org/parksrec)

| Email: [parks@pottervillemi.org](mailto:parks@pottervillemi.org)

Sign up at Potterville City Hall, 319 N. Nelson, Pottervillemi.org



## Please note the deadline to signup

## 2018 LAKE ALLIANCE T-BALL, COACH PITCH REGISTRATION

Player Name \_\_\_\_\_  Male  Female

Date of Birth \_\_\_\_\_ Age: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

Parents Name \_\_\_\_\_

Cell Number \_\_\_\_\_

Email \_\_\_\_\_

Parents Name \_\_\_\_\_

Cell Number \_\_\_\_\_

Email \_\_\_\_\_

### VOLUNTEER INFORMATION

I am interested in coaching  Yes  No

Shirt Size: (CIRCLE) Youth/Adult XS S M L XL

### EMERGENCY INFORMATION

Emergency Contact Person \_\_\_\_\_

I, as parent/guardian of \_\_\_\_\_ (the participant) understand that participation in the Potterville Parks and Recreation Youth T-Ball/Baseball/Softball program involves risk of injury. I understand that these injuries may be the result of the actions, inaction's or negligence of the Participant or others. I agree that the Participant is responsible for his/her actions while participating in Potterville Parks and Recreation activities. I also understand that Potterville Parks and Recreation does not carry medical insurance and that I will have to provide my own insurance for the Participant. Aware of the risks and willing to assume them, I hereby waive, release and hold harmless the City of Potterville, its officers, directors, employees, agents, coaches and associated individuals and entities, including, but not limited to, the city of Potterville, team sponsors, owner of private or corporate properties used by Parks and Recreation, from any injuries incurred during scheduled play or practice on a team in the program. I intend for this waiver and release to also apply to any relative, personal representative, heirs or assigns who might pursue and legal action on the Participant's behalf.

Potterville Parks and Recreation obtains background information on potential volunteers, including coaches, to help ensure the safety of all of our children. Parents must understand that obtaining a background check on volunteers may not ensure a child's safety and Potterville Parks and Recreation is not responsible for the action of any such individuals. It is ultimately the parents' responsibility to protect their children and report any concerns they may have to the Potterville Parks and Recreation Director and to the appropriate officials.

Every attempt will be made to obtain a background check on potential coaches the first year they volunteer and checks may be performed annually on any volunteer.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### SELECT LEAGUE AND SHIRT SIZE

T-Ball Ages 4-6 (Mon-Wed)

\*Practices on Mondays, Games on Wednesdays  
(tentative)

Coach Pitch Ages 6-8 (Mon-Wed)

\*Games on Mondays, Practices on Wednesdays  
(tentative)

\*Cost: \$40 for Residents  
\$45 for Non-Residents

\*Late fee of \$10 will be added to cost for  
signing up after deadline.

**Deadline April 20, 2018**

**Meeting: April 25, 2018**

Shirt Size (CIRCLE) Youth/Adult XS S M L XL