

SUMMER ROOKIE BALL

BOYS & GIRLS AGES 5-7

THURS, JUN 24-AUG 5

AT CULVER FIELD

5, 6, 7pm Games

Fee: Res \$76, NR \$95



- For the player who is ready to move from the batting tee to live pitching from the coach. Volunteer coaches needed.
- Helmet, glove and bat will need to be provided by the player.
All will receive a t-shirt & hat.
 - Players- Face masks are required to be worn in the dugouts, optional when player is on the field. Coaches- Fully vaccinated individuals are not required to wear a mask or social distance. All unvaccinated individuals are required to wear a mask when social distancing is not possible.
 - *Registration deadline is Tuesday, June 1.*

REGISTER by filling out our Registration Form & COVID-19 Guidelines Waiver. Registration will not be accepted if both forms are not signed and returned. Return registration form & COVID waiver to Robin at robin@niles-parks.org.

Rookie Ball / T-Ball Registration Form

Primary Household Contact (First Name) _____ (Last Name) _____

Address _____ City/Zip _____

Home Phone _____ Emergency Phone _____ Cell Phone _____

Email Address _____

Please check (x) if you need special accommodations to participate in this program. ☐

Player's Name	Gender	Age	Grade	School

Please circle the correct league

T-BALL
(4-5 yr. olds on Tuesdays)
220301-03

ROOKIE BALL
(5-7 yr. olds on Thursdays)
220301-04

FEE - Res - \$76 / Non-Res - \$95

COACH NAME: _____ Phone _____
(Please list your name if you'd like to volunteer to coach your child's team)

TEAMMATE NAMES: _____

** Please list the names of the people you would like to be on the same team with.
* We will do our best to accommodate car pool requests but not all may be possible.*

METHOD OF PAYMENT

- Cash MasterCard
 Check # _____ Visa
 Discover

Name: _____ Exp. Date: _____
(as it appears on card)

Card Number

Signature: _____ Amount: _____

Remit to:
Niles Park District
Registration
6676 W. Howard St.
Niles, IL 60714

*Email to robin@niles-parks.org
*A self-addressed envelope must be enclosed in order to receive a receipt.

Total Due \$

WAIVER AND RELEASE OF ALL CLAIMS Please read this form carefully and be aware that in signing up and participating in this program you will be waving and releasing all claims for injuries you might sustain arising out of this program.

Please read this form carefully and be aware that in signing up and participating in the above identified programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services/vehicle operation, when provided.)

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of participating in all these programs/activities against the Niles Park District, including its officials, agents, volunteers and employees (here-in after collectively referred as "District"). I do hereby fully release and forever discharge the District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of connected with, or in any way associated with these programs/activities.

If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effects as an original form signature. Additionally, by signing this form, I am certifying that I qualify for the rate charged (i.e. if resident rate was charged, I am/my children are residents of the Niles Park District). If this is proven untrue, I realize that my park district privileges may be suspended or revoked.

Photos are periodically taken of participants in a class, during a special event or at the District's parks. Please be aware that these photos are for Park District use only and may be used in the District's publications.

I have read and fully understand the above important, warning or risk, assumptions of risk and waiver and release of all claims.

PLEASE PRINT Participant's Name _____

Parent/Guardian Signature _____ Date _____

PARTICIPATION WILL BE DENIED if the signature of adult participant or parent/guardian and date are not on this waiver.