West Rutland Recreation Department **Baseball/Softball 2025 REGISTRATION FORM**

Circle appropriate team			\$10 late fee		
T-Ball: First Time Players Pre-K- Kindergarten \$30	Mighty-Mites: 1 st and 2 nd Grade \$30	Minors Baseball: 3 rd and 4 th grade \$40	Majors Baseball: 5 th and 6 th grade \$40	Minors/Majors Softball: 3 rd – 6 th Grade \$40	

(NON-RESIDENTS: PLEASE ADD \$5 (\$10 FAMILY CAP). MAKE CHECKS PAYABLE TO "TOWN OF WEST RUTLAND" & DROP OFF AT THE WEST RUTLAND TOWN HALL OUTSIDE DROPBOX. DO NOT RETURN COMPLETED FORM AND/OR PAYMENT TO THE SCHOOL)

Name of player	Date of Birth		Grade			
Address	Phone #			Sex		
Size for T-Shirt: Youth sm(6-8) med(10-12)	lg(14-16)	Adult sm	med	lg	xlg	
ther's Name Best Phone#		Email				
Father's Name E	Best Phone#		Email			
Emergency Contact Name		Phone#				
Does your child have any allergies If so,	explain					
Limitations (if any)						
Who, other than parents, has permission to pick chi	ld up?					

*Communication about games, practices and cancellations will be made on the West Rutland Rec Facebook page. It is the responsibility of parents/guardians to check the site for schedule updates.

I, the undersigned agree and understand that:

- 1. Participation in this activity can be hazardous and may result in injury, and participation is potentially dangerous to myself and others.
- 2. I also certify that I am physically capable of participating in this activity.
- Further, I agree that in consideration for permission to participate in the West Rutland School/Town sponsored programs, I assume all risks of 3. injury incurred or suffered while School/Town premises while participating in programs.
- RELEASE: In consideration of your accepting this application in the West Rutland School/Town Program, I hereby release myself, my heirs, 4. executors, and administrators, waive and release any and all rights and claims for damages I may have against the School/Town of West Rutland, the West Rutland Recreation/School Department, their Agents, representatives, and assigns for any and all injuries suffered by me in this program.
- As a matter of caution, the Department strongly recommends that you have accident and health insurance in force when you take part in a Town of 5. West Rutland recreation/school program.
- 6. I am fully aware and understand that transportation for away games is to be provided by parents.
- 7. I grant West Rutland Recreation Department permission to use pictures or video of my child including but not limited to the Town's website and Facebook pages to promote their programs.
- 8. I have read the above informed consent, understand them and agree to abide by them.

Signature of parent/guardian

Year Month Dav

West Rutland Recreation Department: Aimee Pittrich – Director

35 Marble Street, West Rutland, VT 05777 ~ 802-438-2263 ~ e-mail: recreation@westrutlandyt.org https://www.facebook.com/westrutlandrecreation

https://www.westrutlandvt.org/recreation/

Parent volunteers are needed for coaching, officiating, concession stand, and helping to prepare the fields. Please list below what you are willing to help with. Thank you.

Name:

Interest: _____

Registration Deadline March 28, 2025