

SUMMER ROOKIE BALL

BOYS & GIRLS AGES 5-7

THURS, JUN 20-AUG 15

AT NICO & OAKTON MANOR

5:00, 6:00, 7:00 pm

Fee: Res \$87, NR \$108



- For the player who is ready to move from the batting tee to live pitching from the coach. Space limited to 72 kids.
 - Volunteer coaches needed.
- Bats & Helmets will need to be provided by the player.
 - All will receive a t-shirt & hat.
- At least 1 season of T-Ball is recommended.
 - *Registration deadline is FRIDAY, MAY 31.*

REGISTER by filling out our Registration Form.

Return registration form to Robin at robin@niles-parks.org, or in person at
Howard Leisure Center, 6676 W. Howard.

T-BALL / ROOKIE BALL Registration Form

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

Address _____ City/Zip _____

Phone _____ Emergency Phone _____

Email Address _____

Do you need an Americans with Disabilities Act Accommodation? Yes ___

Player Name	Gender	Age	Grade	School

COACH NAME: _____ PHONE: _____

(Please indicate if you would like to be a volunteer coach)

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 request, but all may not be possible.*

Please circle the correct league

T-BALL
(4-5 years old– Tuesday’s)
 #220301-03

ROOKIE BALL
(5-7 years old– Thursday’s)
 #220301-04

FEE: Resident \$87, Non-Resident \$108

TOTAL DUE: \$ _____

Register by Friday, May 31

METHOD OF PAYMENT

Cash Check # _____ MasterCard Visa Discover

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

Card # _____

Signature _____ Amount \$ _____

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

In Person: Howard Leisure Center, 6676 W. Howard St. (M-F 8:30am-5:00pm)

Email to: Robin at robin@niles-parks.org

Register Online: www-niles-parks.org

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 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** _____