

PRICE 2008 B. S. L.

BOYS & GIRLS AGES 5-7 SAT, APRIL 20-JUNE 15 OAKTON MANOR/NICO Noon-3:00 pm Fee: Res \$87, NR \$108

- For the player who is ready to move from the batting tee to live pitching from the coach.
 - 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.
 - Register by Friday, April 5.
 - Questions, call 847-967-1529.



ALL WINTER SPRING PROGRAMS HERE

T-BALL / ROOKIE BALL Registration Form

Primary Household Contact (First Name)(I					(Last Name)	
Address _				City/Zip		
Phone Emergency Phor				ne		
Email Add	ress					
Do you ne	ed an Americans with I	Disabilities Act	Accommodat	tion? Yes	Please circle the correct league	
Player Na	me Gender	Age	Grade	School	T-BALL (4-5 years old– Saturday's) #220301-01	
COACH NAME: PHONE: (Please indicate of you would like to be a volunteer coach)					ROOKIE BALL (5-7 years old– Saturday's) #220301-02	
TEAMMATE NAMES:					FEE: Resident \$87, Non-Resident \$108	
*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.					TOTAL DUE: \$ Register by April 5, 2024	
METHOD OF PAYMENT Cash Check # MasterCard Visa Name:				_		
	As it appears on card)					
Signature						
Mail to: Niles Park District Registration, 6676 W. Howard St., Niles IL 60714 In Person: Howard Leisure Center, 6676 W. Howard St. (M-F 8:30 am-5:00 pm) Email to: Robin at <u>robin@niles-parks.org</u> 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 ____