



**Registration Deadline:  
June 2, 2017**



The Grand Rapids Parks and Recreation Department Youth Sports Program provides a fun and safe environment which promotes sportsmanship, teamwork, skill building and positive parent involvement.

- Practice times are determined by matching participants and coach availability. *Requesting a specific coach is not permitted!*
- All kids are welcome to play in this program.
- All participants receive a T-shirt, award and certificate.
- Each team will meet on Tuesdays, Thursdays and ONE Saturday
- All weekday practice and game times are scheduled between 5:30p.m.-8:30p.m.

**T-Ball/Coach/Player Pitch Schedule:**  
Program begins: June 27  
Season finishes: Thursday, August 3

## 2017 YOUTH T-BALL/COACH PITCH/PLAYER PITCH REGISTRATION FORM

Age Division- <i>Age as of June 15, 2017 check one)</i>		Program Schedule
<p><u>NORTH Practice Location– Aberdeen Park</u></p> <input type="checkbox"/> T-ball: Ages 4-6 (Coed)- #225101A <input type="checkbox"/> Coach Pitch: Ages 7-9 (Coed)- #235201A <input type="checkbox"/> Baseball: 10-11 (Male)- #235301A <input type="checkbox"/> Softball: 10-11 (Female)- #235401A	<p><u>SOUTH Practice Location– MacKay Jaycee Park</u></p> <input type="checkbox"/> T-ball: Ages 4-6 (Coed)- #225102A <input type="checkbox"/> Coach Pitch: Ages 7-9 (Coed)-#235202A <input type="checkbox"/> Baseball: 10-11 (Male)- #235302A <input type="checkbox"/> Softball: 10-11 (Female)- #235402A	<p><b>June 27 &amp; 29</b>– Clinic style practices at Aberdeen &amp; MacKay-JC  <b>July 6</b> – Clinic style practices at Aberdeen &amp; MacKay-JC  <b>July 11 &amp; 13</b>– Team practices  <b>July 18 &amp; 20</b> – Games  <b>July 25, 27 &amp; 29</b> – Games  <b>August 1 or 3</b> –Games</p>
<b>Player's Name</b> _____		Do you have other children playing in this program? If so please list name(s) and ages of all players in your household: _____
Parent/Guardian Name _____ Home Phone _____		
Cell Phone _____ Address _____		
City _____ Zip Code _____ Email _____		
Child's Birth Date _____ Gender: M F School _____ 2016/17 Grade _____		
Please list any allergies, medical conditions or special needs: _____		
<b>Friend Request:</b> Player requests are honored only if <b>both</b> players (in the same age group) request each other prior to June 2, 2017.		
My (requested) friend's name is : _____		
I am willing to be: <input type="checkbox"/> Head Coach (in charge of team; practices & games– approx. 2.5 hrs./week) (Circle One) <input type="checkbox"/> Assistant Coach (assist head coach with 1 practice & 1 game/week) <input type="checkbox"/> Parent Assistant (parent willing to assist coaches based on availability)		Name: _____ Phone: _____ Email: _____
Payment		Registration Deadline: June 2, 2017 After the deadline, add \$5 to the registration fee
Fee: \$42 Resident; \$52 Nonresident Amount Paid: _____ Payment Type: Cash Check Charge		
Visa/Mastercard/Discover # _____ Exp. Date: _____ CVV # _____		
Signature: _____ Date: _____		

**Drop off or mail this form to:** Grand Rapids Parks and Recreation -201 Market Avenue SW; Grand Rapids, MI 49503. **Phone:** (616) 456-3696 #1. **Web Site:** www.grcity.us/parksandrec. Checks payable to Grand Rapids Parks and Recreation.