



# City of Hammond Recreation Department

## Youth **T-Ball** Registration Form

601 W. Coleman Ave.



### PLAYER INFORMATION

Player Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: Male Female Age: 3-6 year olds **ONLY**

Shirt Size: YS 6-8 YM 10-12 YL 14-16 AS AM AL AXL Other \_\_\_\_\_

Hat Size: YS YM YL

**\*\*\*The size you circle is what will be issued.** If you request another size you will be responsible for purchasing the new

### ◆ PRIMARY CONTACT INFORMATION

Parent/Guardian: \_\_\_\_\_

Relationship to Player: \_\_\_\_\_

\*Mobile Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

\*Email: \_\_\_\_\_

**YOU MUST BRING IN A COPY OF THE BIRTH CERTIFICATE. NO COPIES ARE ON FILE!**

**The age of the player is on may 30th of this year will determine what age group he plays in.**

### LIABILITY INFORMATION

**CONSENT FOR MEDICAL TREATMENT** As the parent or legal guardian of the above-named player. I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent.

**RELEASE OF LIABILITY** In consideration of their child being permitted to participate in any event or activity sponsored, promoted, or organized by the City of Hammond Recreation Department, the undersigned for himself or herself, personal representatives, heirs, assigns, relatives, and minor child HEREBY RELEASES, the City of Hammond and its respective insurers, officers, officials, sponsors, employees their agents and Chappapeela Park, hereafter referred to as RELEASES, of any and all liability to the minor child, whether the child is for any purpose participating in such event or activity. It is fully understood by each of the undersigned that there is some inherent risk associated with the activity, including damages to property and personal injury. IN ADDITION, the undersigned AGREES TO ENDEMNIFY AND HOLD HARMLESS the Releases of any loss, liability damage, or cost they incur due to such participation by the child, whether caused by Releases' negligent act or omission, acts or omissions of other participants, other persons or otherwise while the minor is participating in any event or activity organized and/or sponsored by the City of Hammond.

In signing this release, I hereby acknowledge and represents to the City of Hammond the following:

1. That he/she has read the foregoing Release and Waiver of Liability and Indemnity Agreement and fully understands its contents.
2. That his/her minor child participating in the event or activity are in good health, physically fit and physically able to participate in the activity.

**IMAGE CONSENT/RELEASE** I hereby give permission for images of myself and the child for whom I am guardian that are captured during the City of Hammond Recreation Department activities or events through video, photo and digital camera to be used for purposes of documentation, promotion, and publicity of the program and its associated activities and waive any rights of compensation or ownership thereto. As such, I relieve and hereby agree to hold the City of Hammond, City of Hammond Recreation Department, affiliated organizations and sponsors or partners of the City of Hammond Recreation Department free and

### HOW TO SUBMIT REGISTRATION INFORMATION

Fee: \$55 per player

Drop Off  
Michael J. Kenney Center  
601 W. Coleman Ave.  
Hammond, La 70403

Office Hours For Registration  
Monday-Friday 8am - 4pm  
(985) 277-5902

**One check/money order payable to "City of Hammond" may be made for the total amount of players registered.**

### REGISTRATION POLICIES

Late Registration: **The late registration fee (\$65 per player) will be charged after early registration has ended.** After the late registration deadline, all interested players will be placed on the waiting list. There is no guarantee that waiting list players will be placed on a team.

\*Refunds: NONE.

Team Requests: **Requests will no longer be accepted.** All players will be placed in the draft and coaches will make the final decision on team members. Siblings in the same division will be drafted on the same team.

**Parent / Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**By submitting this registration form, you understand and agree to all registration policies.**