



RICHMOND RECREATION

Tri-County Baseball & Softball League

(11 years-18 years of age)

The purpose of the Richmond Recreation Department Softball and Baseball League is for the participants to have fun and learn the fundamental skills of baseball or softball as well as working towards the following goals: learning teamwork, building self-esteem, teaching social and physical skills, creating a fun experience for youth, teaching decision making, responsibility, leadership and respect for authority, as well as other character traits.

Games begin: TBA.

Possible hosting towns/towns involved in Tri-Co.: Braymer, Chillicothe, Excelsior Springs, Gallatin, Hamilton, Hardin, Jamesport, Ludlow, Polo, Richmond, and Trenton.

Coaches will have more information about practice days/times after 3/22/17. Practices start end of March (pending weather).

REGISTRATION DEADLINE: March 16, 2017

Late entry forms will be accepted until teams are full after deadline.

Late entry fee (after registration deadline): an additional \$15.00/ child (no multi-child discount)

Please mark which division the participant will be in based upon their age

DIVISION	AGE	FEES	Division participant will be playing in for the 2017 season (please mark below)
13 & Under Baseball (the age a participant is on 4/30/17)	11-13	\$73.00	
13 & Under Softball (the age a participant is on 4/30/17)	11-13	\$73.00	
18 & Under Baseball (the age a participant is on 4/30/17)	14-18	\$73.00	
18 & Under Softball (the age a participant is on 4/30/17)	14-18	\$73.00	

Multi-Child Discount: Oldest child will pay full price, each addition child will receive \$5.00 off their registration fee.

Child's name _____ Date of birth _____ / _____ / _____ Shirt size YM YL AS AM AL AXL AXXL

Grade _____ Participants age as of 4/30/17 _____

Parent/ guardian name _____ E-mail address _____

Address _____ City _____ Zip code _____

Cell phone _____ Cell phone _____ Work phone _____

Emergency contact _____ Phone _____ Relationship _____

Health concerns of registrant the Recreation Department/coach should be aware of: _____

I am interested in volunteering as: Head Coach: _____ Shirt Size: AS AM AL AXL 2XL 3XL

Head coach picks one assistant coach: _____ Shirt Size: AS AM AL AXL 2XL 3XL

If you are selected to be a head coach, the recreation department will contact you. Please be prepared to attend the coaches meeting/draft in the Recreation Office.

Coaches Meeting & Draft: 18U Softball-3/22/17 @5:00pm; 18U Baseball-3/22/17 @5:00pm; 13U Softball-3/22/17 @5:45; 13U Baseball-3/22/17 @5:45pm

I, the parent/ guardian of the above named candidate for a position on a recreation team, hereby give my approval to participate in any and all recreation activities, including transportation to and from the activities. I know that participation in youth basketball may result in serious injuries and protective equipment does not prevent all injuries to players, and I hereby waive, release, absolve, indemnify and agree to hold harmless the Richmond Parks & Recreation Departments, City of Richmond, the organizers, sponsors, supervisors, officials, participants and persons transporting my child to and from activities for any claim arising out of any injury to my child whether the result of negligence or for any other cause. I agree to return equipment issued to my child in as good of condition as when received it, except for normal wear and tear. I have read and fully understand the above program details and waive and release all claims.

If a "special request" is made, the Richmond Recreation Department cannot guarantee that the request will happen. Our teams are selected by the coaches through a draft. If you have a "special request" (such as you want your child to be on a certain team, with a certain coach, not with a certain coach, or on the same team as another participant) please write your request here: _____

Coaches will see your request. Again, we will try our best to follow through with your request, but it is not guaranteed. Siblings or others living in the same household will be placed on the same team. Once a participant is placed on a team they will not be switched. No Refunds.

Signing below means you are aware this is a game for the KIDS to have FUN and that you have read and agree with the above.

Parent/Guardian Signature _____ Date _____

Please return to the City Collector's Office, 205 Summit, Richmond, MO 64085. Make checks payable to: City Of Richmond

City Hall Hours: M-F 8:00am-4:30pm.

If after 4:30pm, you may put this form/money in the "After Hours" box outside of City Hall—NO CASH IN THE "AFTER HOURS" BOX. IF YOU DO NOT PAY THE FULL AMOUNT STATED ABOVE, AT THE TIME YOU RETURN YOUR FORM, YOUR CHILD WILL NOT BE ELIGIBLE TO PLAY IN THE LEAGUE. SORRY-NO EXCEPTIONS.

QUESTIONS? Please e-mail: Hmorrissey@cityofrichmondmo.org

OFFICE USE ONLY

Amount Paid \$ _____

Date Recorded _____

By _____