

For Office Use Only					
В.С	Yes	No			
Playing Age					
League_					
Team					
Reg. Pd.	Yes	No			

TOTAL FEE

THOSE ELIGIBLE TO PARTICIPATE:

PLEASE CHECK BELOW:

Staff Witness: _____

Children who are residents of the City of Kingsport, whose parents own property in the City of Kingsport or children who attend Kingsport City Schools. Parents or guardians must complete this form and return to the attention of the ATHLETIC OFFICE in the CIVIC AUDITORIUM, 1550 Fort Henry Drive, Kingsport, TN 37664.

The \$15.00 REGISTRATION FEE IS INCLUDED IN TOTAL FEE! A \$5.00 LATE FEE WILL BE CHARGED AFTER DEADLINE AND CANNOT BE WAIVED!!

DRAFT DATE

(Please PRINT parent / guardian signature)

REGISTRATION DEADLINE

1. Minor T-Ball (5-6)	Fri., March 8, 5:30 p.m.	N/A		\$15.00		
AGE ON DECEMBER 31, 2012 DETERMINES PLAYING AGE!						
Child's Name	Date of Birth	/Birth	Certificate No	·		
Address	Zip Code Home PhoneCell			Cell		
Email Address			Male	Female		
Did your child play city recreation baseball / softball in 2012? If so, what league?What team?						
Does your child have any medical or physical problems? If so, please explain						
chool AttendingAge on 12/31/12			on 12/31/12			
VOLUNTEER COACHES are needed. If interested, please sign below: BG Check						
Name	Address			Zip Code		
Home Phone	Cell PhoneEmail Address					
All volunteer coaches will be asked to sign a consent form in order for a mandatory annual background check to be conducted!						
RELEASE OF ALL CLAIMS						
by rules and regulations. In cons	ity of Kingsport Parks & Recreation sideration for the City of Kingsport p ployees from any and all liability, cla	providing recreational a	ctivities, I here	by release the City of		
	to all claims of every kind or nature ly read the foregoing release and k	•	•			
Date:		(Particip	ant's parent / g	guardian signature)		