Town of Pittsfield Recreation Department

Spring Sports 2020 Registration Form

Registration Deadline: Monday March 30th

DROP OFF completed form and payment (cash or check) at the Pittsfield Town Office

Monday -Friday 8:00a.m.- 5:00p.m. (excluding Wednesdays and Holidays)

MAIL completed forms with payment to:

Pittsfield Town Office, 112 Somerset Avenue, Pittsfield, ME 04967

Fees Per Child: Pittsfield Resident $20.00 and Non-Resident $25.00

Checks payable to Town of Pittsfield. Please note the Town does not provide refunds.

_______ Pre-K-Kindergarten T-Ball

_______ 1st-2nd Grade (and beginner players in 3rd) Travel Coach Pitch

_______ 3rd-6th Grade Girls Travel Softball

_______ 3rd-6th Grade Boys Travel Baseball

COMPLETE THE FOLLOWING INFORMATION:

Child’s Name: ___________________________ Age _______ Grade________

Parent/Guardian: __________________________ ______________________________________

Address: ______________________________________________________________________

Cell Phone: __________________________ Message Phone: __________________________

Email: __________________________

Emergency Contact: __________________________ Phone: __________________________

T-Shirt Size: (example youth small, adult small, etc) __________________________

STOP: ONLY fill out if you are interested in Coaching or Umpiring our programs-thanks!

ADULT Name: __________________________ Phone: __________________________

Email: __________________________

Coach for Team: __________________________ Umpire for HOME softball and baseball games: __________________________

Please continue on back
Participant Insurance Information:
(Insurance information is required for participation in our programs)

Insurance Company: ______________________________________________________
Policy Number: _______________________________________________________

Parents/Guardians please read and sign:

I hereby give ______________________________ permission to participate in the programs noted above provided by the Town of Pittsfield. Because of the possible dangers of participating in this sport, I recognize the importance of following rules and instructions of coaches and instructors. I understand that failure of my child to obey and follow all instructions, rules and directions of the coaches and staff may result in his/her suspension from the program. In consideration of the Town of Pittsfield permitting my child to participate in this sport, I hereby assume all risk associated with such participation. I agree to report all injuries to the Town of Pittsfield within 24 hours of their occurrence.

Signature_________________________________________ Date__________

Pittsfield Town Office Staff Only:

Payment: Cash____ Check #_____
Insurance Info: Yes____ No_____
Waiver Signed: Yes____ No_____
Volunteer Form (if applicable): _______