**Westerner Summer Ball Program**

##### 2021 TEE BALL Registration Form

*Boys & Girls Ages: 5 & 6*

Player Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of Aug 1st \_\_\_\_\_\_\_\_\_\_

Parent/ Guardian Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Players Grade \_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any medical concerns for this player: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I will volunteer for: Head Coach Assistant Coach**

## Please indicate T-shirt size for this player: Youth: S M L XL

Games will be played the month of June in Westfield.

Your coach will contact you mid-May with team information

and game schedule.

My child has permission to participate in the program indicated on this form. He/she is in good physical condition and has no health problems that would prevent active participation. I agree to abide by all rules of the Westerner Summer Ball Program. I agree to hold harmless the Westerner Summer Ball Program and any of its agents or affiliates in the event of injury sustained by my child. I also grant permission for my child to be photographed and pictures released for publication.

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

**Fee: $35.00**

**Forms, along with payment, MUST be completed and returned to City Hall by April 23rd.**

Please make checks payable to "Westerner Summer Ball Program."

Drop off or mail to: City of Akron

220 Reed Street

PO BOX 318

Akron, IA 51001