## **REGISTRATION FORM**

860 N. Sequoia Ave							559.5	62.5196							
Parent/Guardian							Home Phone Cell								
Street Address City							Zip Code								
Participant's Name			D.O.B.	. Age	Mal	e/Female		Shirt S	Size -	Please	e Circle	e Size		Fee	
							YXS	YS	YM	YL	AS	AM	AL		
LITTLE HITTER		TK				Gr	ade	Level	: 202	26/202	7 scho	ol year			
<b>BASEBALL</b>															
□ 1 <sup>st</sup> - 2 <sup>nd</sup>		3 <sup>rd</sup> - 4 <sup>t</sup>	1 <sup>th</sup>			7 <sup>th</sup> - 8 <sup>th</sup>	<b>Fee:</b> Little Hitters: \$25 per player <b>Baseball:</b> \$50 per player						r		
SOFTBALL										Softh	all: \$	50 per	player	•	
□ 1 <sup>st</sup> - 2 <sup>nd</sup>		3 <sup>rd</sup> - 4 <sup>t</sup>	h 🗖	5 <sup>th</sup> - 6 <sup>th</sup>		7 <sup>th</sup> - 8 <sup>th</sup>									
Participant's Name			D.O.B.	. Age	Mal	e/Female		Shirt S	Size -	Please	? Circle	e Size		Fee	
							YXS	YS	YM	YL	AS	AM	AL		
LITTLE HITTER		TK		Kinderga	rten		<b>Grade Level:</b> 2026/2027 school year							ol year	
<b>BASEBALL</b>															
□ 1 <sup>st</sup> - 2 <sup>nd</sup>		3 <sup>rd</sup> - 4 <sup>t</sup>	h 🗆	5 <sup>th</sup> - 6 <sup>th</sup>		7 <sup>th</sup> - 8 <sup>th</sup>		Fe	e:				25 per <sub>l</sub> r playe	. •	
SOFTBALL										Softh	all: \$	50 per	player	•	
□ 1 <sup>st</sup> - 2 <sup>nd</sup>		3 <sup>rd</sup> - 4 <sup>t</sup>	h 🗖	5 <sup>th</sup> - 6 <sup>th</sup>		7 <sup>th</sup> - 8 <sup>th</sup>									
Participant's Name			D.O.B.	. Age	Mal	e/Female		Shirt S	Size -	Please	e Circle	e Size		Fee	
							YXS	YS	YM	YL	AS	AM	AL		
LITTLE HITTER		TK		Grade Level: 2026/2027 school year											
<b>BASEBALL</b>															
□ 1 <sup>st</sup> - 2 <sup>nd</sup>		3 <sup>rd</sup> - 4 <sup>t</sup>	h 🗖	5 <sup>th</sup> - 6 <sup>th</sup>		7 <sup>th</sup> - 8 <sup>th</sup>		Fe	e:				25 per <sub>l</sub> r playe		
SOFTBALL										Softh	all: \$	50 per	player	•	
□ 1 <sup>st</sup> - 2 <sup>nd</sup>		3 <sup>rd</sup> - 4 <sup>t</sup>	h 🔲	5 <sup>th</sup> - 6 <sup>th</sup>		7 <sup>th</sup> - 8 <sup>th</sup>									
											Tota	ıl Fee	es:		
liability, charges and e above Program/Service program participants. returned. Less than (2)	I, the undersigned, hereby agree to defend, and hold harmless the City of Lindsay and its officers, employees and agents from and against any and all loss, liability, charges and expenses including attorney's fees and causes of action of whatsoever character which may arise from reason of participation in the above Program/Service or be in any way connected herein. The City of Lindsay does not provide accident, medical, liability or any other insurance for the program participants. Refunds will be granted as follows: No Show = No Refund. Minimum (2) business days cancellation notice = 100% of fee returned. Less than (2) business days cancellation notice = 90% of fee returned with a 10% penalty. Please be advised that participants in the Lindsay Parks and Recreation activities are subject to being photographed, and such photographs may be used to promote city programs.														
Signed								_ Da	te						
***********	****	*****	*****	*****		******		****	****	****	****	****	****		
Cash Check	Check Cr. Card Total Paid						Date Received					Taken by:			