



CITY OF NEW HAVEN RECREATION LEAGUE



The “**Pitching Machine**” Season will begin in **early May and end the middle of June**. Registration deadline is March 15. Please call City Hall @ 549.3177 if you have any questions.

Pitching Machine - 7, 8, 9, & 10 year olds (\$25)
Advanced Pitching Machine - 11, 12, 13, & 14 year olds (\$25)

Please complete the following information and make checks payable to:

New Haven Recreation

Mail it to: P. O. Box 98, New Haven, KY 40051 or drop it off at City Hall.

Players Name _____ Circle one: Female Male

Address _____ Date of Birth _____

Age on April 1, 2019 _____ Shirt Size _____ Preferred Number Choice 1 _____ Choice _____

If a parent would like a shirt please let your child’s coach know when they contact you.

Guardian’s Name _____ Contact # _____

Circle one: I will coach a team. I will help coach a team. I am not interested in coaching.

Please list any special request _____

Indicate Physical Limitations or medical concerns:

I/We the parents of the above-mentioned candidate for a position on a team hereby give my/our approval to participate in any and all League activities. I/We know participation in baseball and/or softball may result in serious injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold harmless the City of New Haven, the organizers, sponsors, supervisor, participants, and persons from activities for any claim arising out of any injury to my/our child whether the result of negligence or for any other cause, except to the extent and in the amount covered by liability insurance. I/We agree in case of emergency, if family physician cannot be reached, authorize the above child to be treated by another qualified licensed physician who is available.

Parent or Guardian Signature _____ Date _____