

Marshall



Parks and  
Recreation

# T-Ball, Softball & Baseball Registration Form

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Participant Name: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: Male or Female

(As of Jan 1, 2022)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Interested in Coaching? Yes or No

Participant Shirt Size (circle one):

**YXS   YS   YM   YL   YXL   AS   AM   AL   AXL**

**I understand that by signing this waiver, I do not hold Marshall Parks and Recreation and/or its employees liable for any injury or accident that may occur during participation of this program.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## For Office Use Only:

Date: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Cash/Check/Card

Check Number: \_\_\_\_\_