



**MARSHALL**  
PARKS & RECREATION

T-Ball, Coach  
Pitch Baseball &  
Softball  
Registration Form

Participant Name: \_\_\_\_\_ Age (As of Jan 1, 2026): \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

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

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

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

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

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

Interested in coaching? Yes \_\_\_\_\_ No \_\_\_\_\_

Interested in sponsoring a team? Yes \_\_\_\_\_ No \_\_\_\_\_

Participant Shirt Size (Please Circle One)

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

I understand that by signing this waiver, I do not hold Marhsall 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: \_\_\_\_\_