Trumansburg

Spring Recreation Pre-K Baseball

www.tburgyouthsports.com tburgyouthsports@gmail.com Visit the website or email with any questions



Registration Due Friday April 11th

Visit the website or email with any questions

The **Trumansburg Spring Recreation Baseball and Softball** program is expanding their recreational baseball program to include a **Pre-K Instructional Program**. This program is available for those players currently in Pre-K programs and will be attending K next school year.

The program will be instructional and follow a format that consists of a combination of stations focused on player skills development mixed with a few innings in a game format.

Games: Tuesdays at 6:00 PM starting the week of May 6th and ending the week of June 3rd.

Fees: \$30 per player (\$25 for families with more than one player).

Coaches Name: __

Coach T-Shirt Size:

Phone:

Coaches: This is a parent-coached program and we need as many coaches as we can get. We will provide detailed training materials, sample practice plans and instructions to make this easier for you. Interested in coaching? Please fill out the form below if you are interested in coaching.

Registration Deadline is Friday April 4/11. Please complete the form below and turn in with payment into either Jason Hodge at the Elementary School or mail them to the Trumansburg Village Offices C/O Spring Baseball/Softball 56 E. Main Street Trumansburg, NY 14886.

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Dates to Remember:	Registration Due Friday 4/11 Pre-K Coaches Meeting Thu 4/24 6:00 PM ES Cafe		
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		Thu 4/24 6:30 PM ES Cafe	
	Games	Tue 6 PM starting 5/6 thr	ough $6/3$
2014	Trumansburg Sprii	ng Recreation Pre-	K Baseball
	not accepted without fee	•	
Players Name:		Grade:	Age:
	YS(6-8) YM(10-12) YL(12		Age:
Player T-Shirt Size:		2-14)	
Player T-Shirt Size: Parents Name:	YS(6-8) YM(10-12) YL(12	2-14)	
Player T-Shirt Size: Parents Name: Phone:	YS(6-8) YM(10-12) YL(12	ress:	

Notice of Waiver

_ Head Coach Asst Coach

Having been informed of the Trumansburg Baseball/Softball League, (We/I) parents/guardians of the child named, do hereby give (my/our) consent to his/her participation in the program. (We/I) do further release, absolve, indemnify and hold harmless the organizers and supervisors, any or al of them. (We/I) do assume all risks and hazards incidental to the conduct of the program. (We/I) hereby waive all claims against organizers, sponsors, and any of the supervisors appointed by them.

Date:	Parents Signature:

Email Address:

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