



**WALKER RECREATION DEPARTMENT
4151 REMEMBRANCE ROAD N.W.
WALKER, MICHIGAN 49534
PHONE: 735-6286**

2012 GIRL'S SOFTBALL REGISTRATION INFORMATION

Dear Parents,

The Walker Recreation Department is sponsoring a Softball Program for girls 6 thru 13 years of age. Listed below is some information you need to know about the program:

1. **Minimum age - Participants must be 6 years old by April 10, 2012.**
2. **Maximum age - A child must not turn 14 years old before April 10, 2012.**
3. **Cost is \$33.00 for City of Walker residents and \$43.00 for non-residents of the City of Walker.**
4. **REFUND POLICY – Refunds will not be issued after your child has been placed on a team unless a replacement is found. The refund will be for the full amount less a \$10.00 administration fee.**
5. **The philosophy of the program is to teach skills and rules to each player. No standings are kept nor league championships awarded.**

EVERY CHILD WILL PLAY IN EVERY GAME AND WILL BE GIVEN AN OPPORTUNITY TO PLAY DIFFERENT POSITIONS.

6. **Practices will begin the week of April 9 and games will begin on Tuesday, April 24, 2012. Each team will play approximately 10 games during the season. Games will be played on Tuesdays and Thursdays evenings at 6:00 p.m. Re-scheduled games may have to be played on Friday evenings or Saturday mornings.**
7. **Each division has been adapted to the ability of each age group through the use of rules and types of pitching. Girls 6-7-8 years of age will bat using a tee and will have rules to help make their games a learning experience for them. The rules and level of the games will progress with ability and age.**
8. **DIVISIONS:**

6, 7 & 8 years of age	Tee Ball
9 & 10 years of age	Coach Pitch
11, 12 & 13 years of age	Players Slow Pitch to Opponent
9. **Each participant must provide their own gloves.**
10. **FOR YOUR CHILD'S SAFETY, WE STRONGLY RECOMMEND THAT YOU PROVIDE HER WITH A PROPER FITTING HELMET. HELMETS WILL BE AVAILABLE, BUT PROPER SIZE IS NOT GUARANTEED.**



Listed below are some things that can help us provide your child with a good experience in the Softball Program:

1. **VOLUNTEER COACHES ARE NEEDED!** If you or someone you know is interested in coaching (or helping coach) please fill out that section on the entry blank.
2. Please fill out the entry form completely and accurately.
3. Please indicate only ONE friend that your child would like to play with and the school the friend attends. Also be certain that person indicates your child. (Please indicate both first and last names.) COACHES CANNOT BE REQUESTED.

If you have any questions about this program, please feel free to call 735-6286.

VOLUNTEER COACHES NEEDED

I AM WILLING TO COACH OR HELP COACH A GIRL'S SOFTBALL TEAM
(COACHES MAY ONLY COACH ONE TEAM.)

NAME _____ AGE GROUP _____

ADDRESS _____ ZIP CODE _____

PHONE (H) _____ (B) _____

I am willing to coach _____ I am willing to help coach _____

Child's Name _____

-----SIGN UP INFORMATION ON BACK PAGE-----

2012 GIRL'S SOFTBALL

PLAYER'S NAME _____ AGE (As of April 10, 2012) _____

ADDRESS _____ CITY _____

ZIP CODE _____ PHONE _____

BIRTHDATE _____ GRADE _____ SCHOOL _____

SHIRT SIZE: Youth: 6-8 ___ 10-12 ___ 14-16 ___ Adult: S ___ M ___ L ___ XL ___

I wish to play (circle one): 6-7- 8 9-10 11-12-13

I WISH TO PLAY WITH MY FRIEND (first and last name) _____

(You may list only one friend and the friend must list you. COACHES CANNOT BE REQUESTED.)

NAME OF SCHOOL FRIEND ATTENDS _____

Check one: Walker Resident _____ \$33. Non-resident _____ \$43.

I hereby give permission for my daughter _____

(Player's Name)

Age _____ to play with a Softball Team during 2012.

(as of April 10, 2012)

WAIVER AND RELEASE OF LIABILITY

In consideration for my daughter being permitted to participate in the Girl's Softball, on behalf of myself, my heirs, executors, administrators, subrogees, and assigns, I hereby **RELEASE, WAIVE, and DISCHARGE** the City of Walker and any department, officer, employee, representative, agent, successor or assign of the City, from any and all liability for personal or bodily injury (including death) resulting from this activity, whether or not caused by the negligence of the City or its departments, officers, employees, representatives, agents, successors, or assigns.

I HAVE READ AND VOLUNTARILY SIGNED THIS WAIVER AND RELEASE OF LIABILITY.

(Mother's Signature)

****both signatures are required****

(Father's Signature)

(Address)

(City)

(Zip)

(Home Phone Number)

(Work Phone Number)

(Email Address)

*****REGISTRATION INFORMATION*****

REGISTRATION MUST BE MADE IN PERSON AT THE WALKER ICE AND FITNESS CENTER, 4151 REMEMBRANCE RD., N.W. DURING OPEN BUSINESS HOURS

WALKER ICE & FITNESS CENTER HOURS:

**Monday through Friday 5:00 a.m. to 10:00 p.m.
Saturday and Sunday 7:00 a.m. to 8:00 p.m.**

DEADLINE FOR REGISTRATION IS FEBRUARY 25, 2012.

**Checks should be made payable to:
WALKER ICE AND FITNESS CENTER**

Please do not mail this form!!!

*****REFUND POLICY*****

Refunds will not be issued after your child has been placed on a team unless a replacement is found. The refund will be for the full amount less a \$10.00 administrative fee.

NOTE:

11-12-13 year olds cannot be 14 years old before April 10, 2012

9-10 year olds cannot be 11 years old before April 10, 2012

6-7-8 year olds cannot be 9 years old before April 10, 2012

Participants may play in a division for players who are older, but players may not play in a division for a younger age group. Example: An 8 year old may play in the 9-10 year old division, but a 9 year old may not play in the 6-7-8 year old division.

The City of Walker is not liable for any injury resulting from this program. Participants in this or any other Walker Recreation Department activity participate at their own risk.

Let's Play Ball!!