



ORD/LOUP VALLEY T-BALL

Boys/Girls Age 5-7



Child's Name: _____

Child's Age: _____ Grade in school 2009-2010: _____ Date of birth: _____

Parents (Guardians) Name(s): _____

Parents (Guardians) contact numbers: Home _____

Work _____

Cell _____

There is a \$5.00 per child/family fee to play. This helps in the upkeep of the equipment. Please return this form, along with the \$5.00 fee, to the school on or before Friday, April 16, 2010. Any questions, please call Becky at 730-1048 in the evening.

I/We give permission for _____ to participate in
(child's name)

the Ord/Loup Valley T-Ball Program during the 2010 season. I will not hold the Ord/Loup Valley T-Ball Organization, the Loup Valley Jaycees, the coaches or the City of Ord responsible for accidents incurred during practices or games. This is a fun league and T-Ball games are intended to help prepare your child for baseball/softball at a later age. Coaches are all volunteers, as is the League organizer, so please keep that in mind.

Parent (Guardian) signature: _____

Date: _____

I would be willing to coach or help coach my child's T-Ball team. Yes _____ No _____

This form will be used for organization of the teams, and you will be notified when the teams have been formed and which team your child will play on. Practices will be when the volunteer coach can work it in their schedule. Boys and girls both play t-ball and all team members will play in the field and bat each inning. The games are played on Monday evenings.