



T-BALL SIGN-UPS

4-6 YEARS OLD

CHILD'S NAME: _____

ADDRESS: _____

PHONE NO. /HOME _____ WORK _____ CELL _____

BIRTH DATE _____ AGE _____

PLAYED BEFORE _____ WHAT TEAM? _____

WHAT COACH _____

SHIRT SIZE(YOUTH) _____

RELEASE FORM:

I, _____ PARENT OR GUARDIAN

OF _____ gives my permission for him/her to practice and play baseball. I hereby release The City of Versailles, The Versailles Park Board and the coaches of any medical responsibility.

SIGNED _____ DATE _____

PAYMENT MUST BE RECEIVED BEFORE THE FIRST GAME JUNE 1ST

Phone: 573-539-5853 (David Vogt)
573-378-4634 (City Hall)

GAMES

JUNE 1 6:00 PM
JUNE 8 6:00 PM
JUNE 15 6:00 PM
JUNE 22 6:00 PM

\$30.00 Entry fee payable to City of Versailles

EACH KID/PARTICIPANT GETS A FREE SHIRT & CAP