



2018 FALL LEAGUE REGISTRATION FORM

Advanced Play League 9 & 10 Year Olds - Cal Ripken Baseball - Levy Park

This league will consist of 48 players. All players who do not make this league are encouraged to register for other fall sports. Please call Parks, Recreation & Neighborhood Affairs for information on other fall programs, 891-3866.

REGISTRATION INFORMATION

Online: Levypark.siplay.com

Drop Off or Mail in:

Myers Park Offices Elite Sporting Goods
(912 Myers Park Dr) (1770 Thomasville Rd)

Birth Certificate, Fee & Proof of Residency are required

SEASON DATES

September 17 - November 9

COST

\$75.00 payable to LEVY PARK APL
at registration

WHO

9 & 10 year olds
Players cannot turn 11 before May 1, 2019

EVALUATIONS

Sunday, August 26, 2018; 3:30pm

WHAT TO BRING

REGISTRATION: Registration Form
Fee
Copy of Birth Certificate
Proof of Residency

EVALUATIONS: Glove & Bat
Catchers should bring their equipment

NOTE: Players that make the Fall Leagues are not guaranteed a spot in the 2019 Spring Leagues

League sponsored by: PRNA and Council of League Presidents of Tallahassee

PLAYER'S NAME _____ AGE _____ BIRTHDATE _____

SHIRT SIZE _____ FIELD POSITION _____

MEDICAL CONDITIONS _____

PARENT NAME _____ • PARENT NAME _____

ADDRESS/ZIP _____ • ADDRESS/ZIP _____

PHONE _____ TXT # _____ • PHONE _____ TXT # _____

EMAIL _____ • EMAIL _____

ARE YOU INTERESTED IN BEING A: HEAD COACH _____ ASSISTANT COACH _____

RESIDENCY: CITY _____ COUNTY _____ OTHER _____

By my signature below, I understand that participation in sports may cause injuries. I agree by my signature below that in the event my child is disabled, injured or incurs a disease of temporary or permanent nature that I will waive all claims or liabilities against the City of Tallahassee, City of Tallahassee Parks, Recreation & Neighborhood Affairs Department (PRNA), Council of League Presidents of Tallahassee (COLP), and Volunteer Park Associations. I hereby certify and take full responsibility that my child's age and address as shown above are correct and meets the requirement of league and zone rules indicated on this registration form. PRNA reserves the right to photograph/video facilities, activities, and program participants for potential future use. All photos/video will remain the property of PRNA and may be used for publicity or promotion purposes only.

PARK USE ONLY

TEAM: _____

AMT PD: _____

CHK# _____

SIGNATURE _____ **DATE** _____