



2022 SPRING LEAGUE REGISTRATION FORM

Advanced Play League 11 & 12 Year Olds Cal Ripken Baseball - Myers Park

All Players who do not make this league are encouraged to register for the Little Major League program at either Capital, Meridian, Withrop Parks by Wednesday, January 19.

Please call 850 891-3875 for additional information or questions about this program.

Players may only register in one PRNA endorsed baseball program during this season.

REGISTRATION INFO

DROP OFF: Elite Sporting Goods
1854 Thomasville Road

DEADLINE TO REGISTER: JANUARY 14

SEASON DATES

January - May 2022

TRYOUTS

Saturday, January 15, Time TBA

Attendance is MANDATORY

Results will be posted - Sunday, January 16

WHO

11 & 12 year olds

Players cannot turn 13 before May 1, 2022

For players who reside in Tallahassee/Leon County

WHAT TO BRING

Players should bring their glove and bat.

Catchers should also bring their equipment.

COST

\$100

If additional information is required,
contact the Myers Park President, Brent Sims at BSims70913@gmail.com

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

PLAYER'S NAME _____ AGE _____ BIRTHDATE _____

SHIRT SIZE _____ FIELD POSITION _____

OTHER SPRING COMMITMENTS _____

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 daims 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** _____