

# Play Ball!

It's that time of year again! The Wentworth Ball Program is now accepting applications for the upcoming season. There are a few changes this year that parents and players need to make note of, so please read this entire form carefully. The registration form is on the back of this sheet.

**Registration Fees:** \$40 per player. Families with 3 or more siblings participating in the Wentworth Ball Program - \$35 per child (Players receive a shirt, hat and trophy)

**Registration Ends:** Friday, February 17<sup>th</sup>. A Registration Fair will be held from 10:00AM-12:00PM on Saturday, February 11<sup>th</sup> at the Wentworth ball field.

**Note:** ALL forms and payments MUST be received by this date. Forms received after the cutoff date MAY be allowed on a first come basis, but this is NOT guaranteed. ONLY the number needed to fill rosters will be allowed after the cutoff date unless enough forms are received to form additional NEEDED teams. NO REFUNDS AFTER February 25<sup>th</sup> 2012.

**Required Information:** Completed registration form, signed waiver form, Parent's Code of Conduct form and payment. Incomplete forms or unsigned forms will NOT be accepted and may result in your child not being included.

**Who May Play: EVERYONE!** Regardless of which school you attend, you are welcome to play with us.

**Where To Send Forms:** You may deliver the completed form on the back of this sheet with your payment directly to Wentworth Elementary School, bring it to the Registration Fair or you may mail the completed form with your payment to:

Wentworth Elementary School  
Attn. PTA  
8806 NC Highway 87  
Reidsville, NC 27320

Please make checks payable to: **Wentworth Elementary Ball Program**

**\*\*NOTE\*\* - Space is limited, so we encourage you to get the forms in QUICKLY  
Registration is in the order forms are received**

## 2012 Leagues

### **Youth Baseball \***

T-Ball	Ages 6 & Under (both boys and girls in this age range will play T-Ball)**
Coach Pitch	Ages 9 & Under (Boys only)
Machine Pitch	Ages 12 & Under (boys only)

### **Girls Softball \***

Coach Pitch	Ages 9 & Under
Machine Pitch	Ages 12 & Under***

\* Younger players with more experience or those with advanced skills may "play up" in the next league and less experienced or players with skills still developing may "play down" in a league. Te coaches in that league and the Wentworth Baseball Director will evaluate that player in the first practices and make a recommendation to the parent/guardian. We will not force a player to play in any league they and their parent/guardian do not want them to play in, but will make recommendations based on our evaluation of that child's abilities.

\*\* No score will be kept for T-Ball and there will be NO playoffs for T-ball.

\*\*\* Younger players and those with less experience will NOT be allowed to play certain positions in machine pitch due to the risk of injury. Each coach will make the determination as to where players will play each game. These guidelines are outlined in the rules given to coaches at the beginning of the year

We look forward to a great year and a lot of participation. If you have any questions or need additional information, you may contact Brian King @ 520-4880 bdking112@live.com, Andrea Hall @ 951-9354 arhall5@bellsouth.net or Bobby Hyler @ 613-2617 bhylar@bellsouth.net

Sincerely,

Brian King  
Ball Program Coordinator

# Wentworth Ball Program Registration and Waiver

## Player Information

Player Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Years Played: \_\_\_\_\_

School:  Wentworth  Monroeton  Lincoln  Bethany  Other: \_\_\_\_\_

T-Ball (6 & Under-Boys/Girls)  Coach Pitch Baseball (9 & Under Boys)  Machine Pitch Baseball (12 & Under Boys)  Coach Pitch Softball (9 & Under Girls)  Machine Pitch Softball (12 & Under Girls)

T-Shirt Size: Youth-  Small  Med.  Large Adult-  Small  Med.  Large  Other: \_\_\_\_\_

*Please check your child's shirt size. If in doubt, please choose a larger size*

Other Info. : \_\_\_\_\_

*If you would like to request a certain day for practice, that siblings be on the same team or other requests (NO guarantees can be made, but we will try to honor requests)*

## Parent / Guardian Information

Primary Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Add. Ph. Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail 1: \_\_\_\_\_ E-Mail 2: \_\_\_\_\_

Relationship:  Father  Mother  Grandparent  Guardian  Other \_\_\_\_\_

Other Contact : \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship:  Father  Mother  Grandparent  Guardian  Other \_\_\_\_\_

## Waiver

I, the parent or legal guardian of the above child, do hereby register my child to participate in the Wentworth Ball Program provided by the Wentworth Elementary School PTA. By signing this form, I hereby acknowledge and accept:

- That my child is healthy and capable of safe participation in the Ball Program.
- That there is a risk of injury in participating in sports activities.
- That my child will follow the instructions of the coaches and follow league rules at all times in order to avoid injury.
- That my child may suffer an injury at some point while participating in the Ball Program.
- That, in the event of an injury to my child where I am not available and no other adult responsible for my child is present to make decisions pertaining to his or her injury, I authorize the coaches, program officers or other Wentworth Ball Program or PTA officials to make arrangements to tend to the medical needs of my child. This includes treatment at the time of injury and/or transportation to the nearest medical facility for treatment, whichever is deemed necessary by said officials or a competent medical attendant.
- That photographs of my child taken during games, practices or other events may be used or displays, brochures or other promotional materials with no compensation to me.

In consideration of the acceptance of this entry, I hereby, for myself, my heirs, executors, administrators and assigns, release and discharge the Wentworth School, Wentworth PTA, all sponsors, staff, coaches, assistants and organizers from retribution for any injury or loss which might occur during my child's participation in the Wentworth Ball Program.

Parent/Guardian Name: \_\_\_\_\_

Please Print

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Insurance Comp.: \_\_\_\_\_

Group #: \_\_\_\_\_ Member ID #: \_\_\_\_\_

### Office Use ONLY

Date Registered: \_\_\_\_/\_\_\_\_/\_\_\_\_ Receipt #: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Registered By: \_\_\_\_\_ Cash / Check \_\_\_\_\_ Check #: \_\_\_\_\_