



CENTER REC T-BALL REGISTRATION FORM

CHILD'S NAME: _____

PARENT'S NAME: _____

STREET ADDRESS: _____

CITY: _____ **STATE:** _____

HOME PHONE: _____

CELL PHONE: _____

EMAIL: _____

BOY _____ **GIRL** _____

SHIRT SIZE: XS _____ S _____ M _____ L _____ XL _____ XXL _____

(SHIRTS SIZES CAN NOT BE EXCHANGED ONCE THEY ARE ORDERS)

SIBLING PLAYING T-BALL? YES _____ NO _____

NAME OF SIBLING: _____

COST: 50.00 PER CHILD (\$25.00 EACH ADDITIONAL CHILD)

MAKE CHECKS PAYABLE TO CENTER RECREATION.

CHECK #: _____

CASH: _____

CENTER REC BOARD/STAFF INITIALS: _____