**Fraser Valley T-Ball and Machine Pitch Information**

Ph#726-5919 Email: Anthony@fraservalleyrec.org or Austin@fraservalleyrec.org

**Welcome Players and Parents,**

 It’s time to register for the upcoming baseball season. A blank registration and medical release form have been attached. Please fill out the form completely, both front and back. Forms can be dropped off or mailed to the FVMRD Recreation Center.

 **The Registration Deadline is Friday, May 10th, 2019.** Registrations will not be processed without full payment. Make checks payable to Fraser Valley Metropolitan Recreation District.

 **1. Fees:**

 T-Ball Ages: 5-6 $85

 Machine Pitch Ages: 6-8 $90

 **2. Tentative Practice Schedule:**

Practices will be held at the Fraser Valley Sports Complex and Aksel Nielsen Field. **Machine Pitch and T-Ball coaches will contact players prior to first practice for time and location.**

 **3. Games:**

Games are scheduled to begin in mid-late May and season will end June 30th. Machine Pitch will play an 8 game season and T-ball will play 6 games. A majority of the games will be played at the Fraser Valley Sports Complex. **Game schedules will be available at** [**www.quickscores.com/fraservalleyrec**](http://www.quickscores.com/fraservalleyrec)**.**

**4. Volunteers:**

Volunteers are needed to coach teams. Coaches are normally the parents of the players. Invest a few hours a week for a lifetime of memories. Umpires are also needed. The league trains umpires and pays up to $25 per game. Players ages 13 and older are eligible to umpire. Parents are also welcome. For more information on how you can help with this program contact the Fraser Valley Sports Complex at 970-726-5919.

5. **Uniforms:**

Jerseys and Hats will be provided that your child will keep. **Parents will be responsible for purchasing grey colored baseball pants as well as coordinating solid colored socks and belt.**

**Fraser Valley T-Ball and Machine Pitch Registration**

Players Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

League Age as of 4/30/2019\_\_\_\_\_\_ (T-Ball will use 9/30/2019) Female Male

 T-Ball (5-6) $85 Machine Pitch (6-8) $90

Youth Shirt Size (circle one) S M L

 **I am interested in being a volunteer coach.** **Adult Coach Shirt Size (circle one) S M L XL**

 *(Volunteer coach’s children’s registration fee will be comped)*

**Registration Deadline is Friday, May 10th. Late registration will be accepted as space is available. Forms must be completed and turned in at the Grand Park Recreation Center.**

Physical Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Town:\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_

Partcipant/Parent/Guardian1:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Ph#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant/Parent/Guardian2:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Ph#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, the undersigned, understand the dangers and risks involved with participation or being a spectator with the General Recreation Athletic Programs and the possible injuries that can occur. In consideration of being permitted by the Fraser Valley Metropolitan Recreation District to either participate in or to be a spectator with the General Recreation Athletic Programs, I hereby assume all risks and release, indemnify, waive, discharge, and covenant not to sue (both myself and minor children of mine attending such activities and for my heirs, personal representatives and assign), the Fraser Valley Metropolitan Recreation District and, its Board of Directors, all of their employees, officers, committee representatives and assistants from all liability to me of any loss, damage or personal injury or any such claims, on my minor children present at such activities, whether or not caused totally or partially, by the negligence of the Fraser Valley Metropolitan Recreation District or such persons while the undersigned is participating in such activities or is a spectator at such activities. The Undersigned hereby assumes full responsibility for any risk or bodily injury of property damage caused by such described participation or as a spectator. I further release all officials, supervisors, employees, and other agency personnel from any claim whatsoever, including negligence, on account of first aid treatment, or services render to me or my minor children during or after such described participation or while acting as a spectator. This general release shall apply until revoked or canceled in writing by the undersigned. **I THE UNDERSIGNED, UNDERSTAND THIS RELEASE WILL BE ON FILE FOR THE YEAR 2019 TO COVER ANY PARTICIPATION OR BEING A SPECTATOR WITH THE GENERAL RECREATION ATHLETIC DEPARTMENT PROGRAMS FOR THE YEAR 2019.**

Date Signature

**AUTHORIZATION FOR EMERGENCY MEDICAL CARE:**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Herebygive permission to the Fraser Valley Metropolitan Recreation District Administration or staff to contact a doctor for medical or surgical care for treatment or care for myself or my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_Should an emergency arise, the expense of emergency medical treatment or care will be accepted and paid by me.

Date Signature

 (Participant or Parent/Guardian)

**Person other than parent/guardian to be notified in case of emergency situation when parents are not available:**

Name H#\_\_\_\_\_\_\_\_\_\_\_\_\_\_W#\_\_\_\_\_\_\_\_\_\_\_C#:\_\_\_\_\_\_\_\_\_\_

Name H# \_\_\_\_\_\_\_\_\_\_\_\_\_\_W#\_\_\_\_\_\_\_\_\_\_\_C#:\_\_\_\_\_\_\_\_\_\_

Name ­­­­­­­ ­­­­\_\_\_\_\_ H#\_\_\_\_\_\_\_\_\_\_\_\_\_\_W#\_\_\_\_\_\_\_\_\_\_\_C#:\_\_\_\_\_\_\_\_\_\_

In case of serious injury or illness when neither parent/guardian nor emergency contact can be reached, will you allow you or your child to be transported to the emergency clinic by an employee of the FVMRD. YES [ ]  NO [ ]

**Please complete Media Waiver and Release on other side.**



**Media Waiver & Release**:

I consent to my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_being photographed, interviewed and/or videotaped by representatives of FVMRD media outlets (newspaper, T.V. stations, etc.). Any information or images obtained from those activities may be reproduced by the FVMRD and/or the public media for use in advertising, publicity or educational activities, including but not limited to district and school publications, videos, print and television news. I hereby waive any claims I may have, and release the FVMRD and its employees from liability of claims arising out of such activities.

\_\_\_\_\_\_\_\_\_ Yes, my child may be photographed, interviewed or videotaped for media use. \_\_\_\_\_\_\_\_\_\_No, my child may not be photographed, interviewed or videotaped for media use.

**FVMRD Website:**

I consent to my student’s first name ­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_only and/or picture appearing on the district’s website.

\_\_\_\_\_\_\_\_\_ Yes, I do \_\_\_\_\_\_\_\_\_\_\_ No, I do not

**Verification:**

I verify that the information provided on this form is accurate and current, and that I am the legal parent/guardian of this student.

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 SIGNATURE of Parent/Guardian PRINT Name of Parent Date

**GRAND COUNTY YOUTH BASEBALL**

**SPONSORSHIP PROGRAM**

The Fraser Valley Baseball program continues to be a popular summer activity for Grand County youth. Participation is strong in all divisions, which in turn means an increased number of teams and increased attendance at games. Our players range in age from 5 – 12 and participate in different levels of play; including Tee Ball, Machine Pitch, Minors and Majors. We are anticipating multiple teams in each division this season.

 With the increased interest in our baseball program we find ourselves in need of community support in order to provide proper and safe equipment for our players. We are proud of our kids and want to supply teams with everything they need to continue to compete, learn, and enjoy the game of baseball.

 We have developed a multi-level program which we feel will allow you to express your support for our baseball program, and provide you with the exposure that our community will recognize when attending games. Please review reverse side for sponsorship levels. Sponsors will be responsible for the cost of banners. Fraser Valley Baseball greatly appreciates your support and we look forward to another great season.

Sincerely,

Austin DeGarmo and Anthony Pezzetti

Fraser Valley Youth Baseball

 Fraser Valley Metropolitan Recreation District

P.O. Box 3348

Winter Park, CO 80482

Ph# 726-5919

Email: Anthony@fraservalleyrec.org or Austin@fraservalleyrec.org

**FRASER VALLEY BASEBALL**

**SPONSORSHIP PROGRAM**

 \_\_\_\_\_ **GRAND SLAM LEVEL**  **$ 800.00**

 Team Sponsorship - (Team jersey with sponsor’s name and logo)

 Banner - (4’ X 10’ banner on outfield fence)

 \_\_\_\_\_ **HOMERUN LEVEL** **$ 500.00**

Banner - (4’ X 10’ banner on outfield fence)

 \_\_\_\_\_ **TRIPLE LEVEL** **$ 400.00**

Team Sponsorship - (Team jersey with sponsor’s name and logo)

 Name of Sponsor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Sponsor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Amount Paid \_\_\_\_\_\_\_\_\_\_ Date Paid \_\_\_\_\_\_\_\_\_\_

 Method of Payment Check # \_\_\_\_\_ Cash \_\_\_\_\_