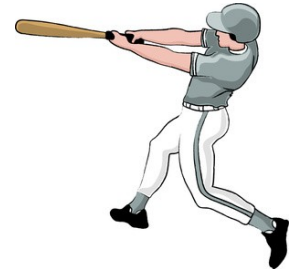




Town of Aberdeen Parks & Recreation Department

**2025 Coach Pitch Baseball
Registration**



Deadline: June 27th **(Or Until Full)**
Eligibility: Boys and Girls Ages 6-8 (as of 8/31/25)
Fee: Residents \$15 / Non-residents \$30

First Practice - Tuesday, July 8th

Participant's Name: _____ DOB: _____ Female / Male

Age (as of 08/31/25): _____ Email: _____

Address: _____ City: _____

Preferred Phone #: _____ Secondary Phone #: _____

Parents Name(s): _____

How did you hear about this league? _____

Medical Problems: _____

****Parents, would you like to volunteer? Coach _____ Asst. Coach _____**

If Yes, contact Name _____ Number _____ Email _____

****Would you like to sponsor a team or know a business that would? Yes ___ No ___**

If Yes, contact Name _____ Number _____ Email _____

Do you have any team, player or coaching requests? _____

PARENTS READ CAREFULLY

I hereby agree to allow my child to participate in the activity sponsored by Aberdeen Parks and Recreation Department. I understand that my child shall abide by all league rules as a condition of participation or a risk of expulsion from the program. I understand that my child may suffer accident or injury as a direct or indirect result of participation and agree to assume all risk involved in my child's participation. In the event of an injury, I will not hold the Town of Aberdeen, agents, volunteers, or employees responsible or liable. I also give permission to Aberdeen Parks and Recreation Department to give medical attention to my child as deemed necessary. I also release any pictures taken during this program to be used as promotional purpose.

Parent Signature _____ Date _____

Player Shirt Size: YS YM YL AS AM AL AXL AXXL

Coach Shirt Size: AS AM AL AXL AXXL AXXXL AXXXXL

For Department Use Only

Registration Fee: \$15 R \$30 NR CC CASH CHECK# _____ ONLINE CC Date Paid _____ Staff _____