



Town of Aberdeen Parks & Recreation Department

2025 T-Ball Registration

Deadline: August 8th (Or Until Full)
Eligibility: Boys and Girls Ages 4-6 (as of 8/31/25)
Fee: Residents \$15 / Non-residents \$30



First Practice - August 26th (subject to change)

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, Name _____ **Number** _____ **Email** _____

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

If Yes, Name _____ **Number** _____ **Email** _____

Do you have any team, player or coach 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 or video taken during this program to be used as promotional purposes.

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 _____