

Jerseyville Parks & Recreation Department

401 Mound Street ♦ Jerseyville, IL 62052

618.498.2222 ♦ www.jerseyville-il.us



Itty Bitty T-Ball

(For ages 3 – 4)

Sessions: 4-4:45, 5-5:45, 6-6:45 & 7-7:45

This is a non-competitive skill development program that uses small group rotations through skill stations, including hitting, base running, catching, grounders and throwing. Scrimmaging begins at week 3. The final week will consist of an entire scrimmage and no station work.

- Program meets six (6) Sunday evenings from **June 7 – July 19 No class June 21**
- Fee is \$30/child and includes a participation medal
- Special equipment required: glove and water bottle
- Program uses parents as volunteer station leaders**
- Parent/guardian must stay onsite during the duration of program
- All sessions will be held at Diamond D at Dolan Park
- In the event of rain, the session will be moved inside the Susnig Center
- Registration deadline is Wednesday, June 3, 2020!**



*****RETURN THIS FORM WITH PAYMENT TO: JPRD/ 401 Mound Street / Jerseyville, IL 62052*****

Fee: \$ 30/child (fill out separate form for each child) Method of Payment: Check # _____ Cash

Time: 4-4:45pm 5-5:45pm 6-6:45pm 7-7:45pm

Participant's Name _____ Age (on 6/7/20) _____ DOB _____ Gender: M F

Primary Guardian Name _____ Home Phone _____ Cell Phone _____

Email Address (ONLY used for program purposes) _____

Home Address _____ City _____ State _____ Zip _____

Describe any special accommodations this participant may need _____

Would anyone in your household like to be a volunteer station leader? Yes No If yes, name? _____

Participant Release Statement: I hereby, for the participant and myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I or my child may have against the City of Jerseyville its successors and assigns, its employees, agents, officers and directors for any and all injuries suffered by myself or my child at any activity sponsored by these groups. I further understand the risks and dangerous situations attendant to the activity for which my child is entering. I understand medical coverage is my responsibility. **PHOTO PERMISSION:** I grant permission for pictures to be used in the City of Jerseyville publicity materials. **ACTIVITY DISCLAIMER:** I understand that the City of Jerseyville reserves the right to cancel, combine or divide classes. In addition, there may be a need to change dates, times, locations, instructors, fees or program outline revisions of any activity offerings.

Guardian's Signature _____ Date _____

Jerseyville Parks & Recreation Department ♦ IB T-Ball ♦ Summer 2020

For JPRD use only
Registration Taken By _____ Date _____ Fee Paid _____ Entered By _____ Date _____