

# Magee Recreation Youth Sports Registration Form 2025

**Baseball Registration Is \$65 Registration Ends February 7<sup>th</sup> Must Attach a Copy of Birth Certificate If Not On File**

All Players 3-12 Years Old Must Register **BY** This Date  
Players 13-15 Years Old Must Register **BY** April 4<sup>th</sup>

The Season **WILL** Start on **MARCH 24<sup>th</sup>**  
**Age Cutoff Date Is May 1<sup>st</sup>**

Player's Full Name: \_\_\_\_\_

M  F Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ School: \_\_\_\_\_

Played Before:  Y  N How Many Years: \_\_\_\_\_ Was an All-star last year:  Y  N

Position(s) Played:  1<sup>st</sup>Base  2<sup>nd</sup>Base  3<sup>rd</sup>Base  Short-Stop  Outfield  Pitcher  Catcher

Do You Play on a Select/Travel Team?  Y  N If Yes, Team Name: \_\_\_\_\_

Jersey Size:  YXS  YS  YM  YL  YXL  AS  AM  AL  AXL  A2XL  A3XL

Guardian Name: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Siblings' Names & Ages That Are Playing: \_\_\_\_\_

## Head Coach

Every season, we spend many hours calling and asking parents to volunteer to **head coach** their child's team.  
We urgently ask that you please consider **head coaching** your child's team. Thank You.

Name: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

## Sponsorship is \$350 Per Team

Name of Business/Name of Team: \_\_\_\_\_ # of Teams Sponsoring: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Injuries to participants in youth sports programs may occur from risks inherent in that sport or activity; from placing stress on the body that has not been prepared for; from accidents in learning or practicing play techniques; from failing to follow game, training, safety, or other team rules; from the use of transportation to and from games and other events; and from administration of first aid. Injury can include direct physical, and possibly crippling, injury to one's body, and emotional injury experienced as a result of inflicting injury to another or witnessing it. The severity of injury can range from minor cuts, scrapes, or muscle strain to catastrophic injury such as paralysis or even death.

In consideration of the City of Magee and of its Department of Parks and Recreation permitting my child or ward to participate in its Youth Sports Program(s), I hereby agree on behalf of my child or ward that he or she will assume the risk of injury or death from participating as outlined above. I release the City, its Department of Parks and Recreation, the Department's employees, advisory councils, officials, and/or volunteers from any liability resulting from my child's or ward's participating in this sport or activity. This assumption of risk and release binds my child's or ward's heirs, estate, executor, or administrator, and assigns all members of my family.

Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Register @ Magee City Hall  
Mon-Fri, 8AM-5PM**

# Magee Recreation Youth Sports Registration Form 2025

**Softball Registration Is \$65 Registration Ends February 7<sup>th</sup> Must Attach a Copy of Birth Certificate If Not On File**

All Players 3-12 Years Old Must Register **BY** This Date  
Players 13-15 Years Old Must Register **BY** April 4<sup>th</sup>

The Season **WILL** Start on **MARCH 24<sup>th</sup>**  
**Age Cutoff Date Is January 1<sup>st</sup>**

Player's Full Name: \_\_\_\_\_

M  F Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ School: \_\_\_\_\_

Played Before:  Y  N How Many Years: \_\_\_\_\_ Was an All-star last year:  Y  N

Position(s) Played:  1<sup>st</sup>Base  2<sup>nd</sup>Base  3<sup>rd</sup>Base  Short-Stop  Outfield  Pitcher  Catcher

Do You Play on a Select/Travel Team?  Y  N If Yes, Team Name: \_\_\_\_\_

Jersey Size:  YXS  YS  YM  YL  YXL  AS  AM  AL  AXL  A2XL  A3XL

Guardian Name: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Siblings' Names & Ages That Are Playing: \_\_\_\_\_

## Head Coach

Every season, we spend many hours calling and asking parents to volunteer to **head coach** their child's team.  
We urgently ask that you please consider **head coaching** your child's team. Thank You.

Name: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

## Sponsorship is \$350 Per Team

Name of Business/Name of Team: \_\_\_\_\_ # of Teams Sponsoring: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Injuries to participants in youth sports programs may occur from risks inherent in that sport or activity; from placing stress on the body that has not been prepared for; from accidents in learning or practicing play techniques; from failing to follow game, training, safety, or other team rules; from the use of transportation to and from games and other events; and from administration of first aid. Injury can include direct physical, and possibly crippling, injury to one's body, and emotional injury experienced as a result of inflicting injury to another or witnessing it. The severity of injury can range from minor cuts, scrapes, or muscle strain to catastrophic injury such as paralysis or even death.

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Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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