



## SHENANDOAH ATHLETIC BOOSTER REGISTRATION FORM BASEBALL AND SOFTBALL

It is almost Spring which means it is time to sign up for Shenandoah Athletic Booster Club 3rd-6th grade baseball and softball. **We need these forms back by Wednesday, March 10 so we know numbers to sign up teams.**

If you have questions, please contact Jon Weinrich at [weinrichj@shencsd.com](mailto:weinrichj@shencsd.com) or 246-4727.

These teams will be registering to participate in the Western Iowa Boys Baseball League (WIBBL) and Western Iowa Girls Softball League (WIGSL). We will register **BOYS** teams for 10U (**Current 3rd and 4th grade**) and 12U (**Current 5th and 6th grade**). We will register **GIRLS** teams for C Division (**Current 3rd grade**), B Division (**Current 4th and 5th grade**) and A Division (**Current 6th grade**). **These teams will practice and play on WEEKDAY nights with games being played in towns throughout SW Iowa.**

### PARTICIPANT INFORMATION

Parent(s)/Guardian(s) \_\_\_\_\_  
Phone # \_\_\_\_\_ Email \_\_\_\_\_  
Emergency Contact (Not Parent/Guardian) \_\_\_\_\_ Phone # \_\_\_\_\_

### SIGN UP INFORMATION

**FEES: \$30 per player**

NAME(S)	GRADE	BASEBALL/SOFTBALL	SHIRT SIZE	FEES
				\$
				\$

☐ Please check the box if you are interested in trying out for a select team that will play more extensively in bigger tournaments on the weekends. \*\*\*These will be tryout teams, you will be required to help with tournament expenses, some tournaments may require overnight stays. Once selected you will be given further information.

Please make checks payable to the SHENANDOAH BOOSTER CLUB TOTAL \$ \_\_\_\_\_

**REGISTRATION FORMS ARE DUE WEDNESDAY, MARCH 10**

**Please return to SHS Schools (attn: Jon Weinrich)**

I, as participant or parent/legal guardian of the above named child(ren), hereby give permission for his/her/my participation in the above listed activity(ies). I further authorize, without my prior approval, the rendering of any emergency medical treatment that may be necessary due to his/her/my participation in the activity(ies). By signing this agreement, I the participant, parent, and/or guardian understand that participation in this activity may result in some type of injury. I hereby give permission for my child(ren), ward, or myself to participate in the above registered activity and certify that myself or my child is physically fit to join in the activities. I hereby waive, release, and agree not to hold the Shenandoah Athletic Booster Club and/or any volunteer parent coaches, sponsors or supervisors liable for any injuries that may occur as a result of participation in these activities. I also give my permission for any photos/videos, etc. of these participants during this activity to be used for future departmental promotional materials.

Parent(s)/Guardian(s) Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Volunteer Information

I am willing to be (CIRCLE):

Head Coach      Assistant Coach

BASEBALL      SOFTBALL

Name \_\_\_\_\_

Phone # \_\_\_\_\_