



IOWA FALLS PARKS AND RECREATION
 YOUTH SOFTBALL REGISTRATION
 GRADES 3 & 4 (Grades currently in)

Please fill out and detach the bottom portion of this sheet to register your child for the summer softball program. Play/practices will begin in May and conclude in early July. When teams are divided and coaches assigned, you will be contacted and receive more information.

The fee for this program is \$20.00 which includes a t-shirt for each child. Information on financial assistance is available for those who wish to participate but are unable to because of the cost. Please contact City Hall for more information. To ensure a t-shirt, registrations must be received by April 2. **After April 2, the cost will be \$25.00 and placement on a team is not guaranteed.** Please drop off form to City Hall, 901 Washington. These forms are not to go to the schools

Games/practices will be on Tuesday and Thursday in the evenings so that we can facilitate adult supervision. We are seeking volunteers to help coach, umpire and to help with the concession stand. If you are interested or know of anyone who might be, include this information on the registration form. **Coaches will contact players in May.**

If you have any questions concerning this program or the registration, please contact the Park and Recreation Department at 648-2527. We stress...PARTICIPATION...FUNDAMENTALS...SPORTSMANSHIP...and LOTS OF FUN!!

 Please make checks payable to: CITY OF IOWA FALLS
 Return form to City Hall, 901 Washington
 (Do Not Return Form to the School)

Child's Name: _____ Age: _____ Current Grade: _____

Parent's Name: _____ Address: _____

Phone Number(s): _____

Email Address: _____

Work for company sponsor? Y or N Would you like your child on company team? Y or N

Name of Company: _____ (Placement on team not guaranteed)

Does your child have any special needs that coaches need to be aware of? _____

I/we are interested in helping: (circle and specify name)

Coach _____ Assistant Coach _____ Umpire _____ Concession Stand _____

Shirt size: (circle one) Child Large Adult Small Adult Med. Adult Large Adult XL

3-4 sb/21 Date Paid: _____ Amount: \$20.00