

SUMTER COUNTY RECREATION & PARKS
2019 SPRING BASEBALL / GIRLS' SOFTBALL REGISTRATION
 (Please Print or Type)

Participant's Name _____ Male / Female

Full Name Required: First Middle Last

Birthdate: _____

Address _____ City _____ State _____ Zip _____

Primary #(____) _____ - _____ Second #(____) _____ - _____ (Parent) E-Mail _____

Is this a new participant - *Yes / No.* If returning, has any of the information above changed since last year - *Yes / No*

Parent's Name (Print) _____ I will coach *Y/N* I will assist *Y/N*

School _____ Player's Size: *YouthS * YM * YL * AdultS * AM * AL * AXL * AXXL*

I would like to sponsor a team *Y/N* If yes, Sponsor's Name _____ # (____) _____ - _____

PLEASE CHECK APPROPRIATE AGE GROUP			
Baseball			
<input type="checkbox"/>	4 & 5 yr olds T-Ball	(As of 9/01/2019)	Age _____ \$35.00
<input type="checkbox"/>	6 Year olds	(As of 4/30/2019)	Age _____ \$35.00
<input type="checkbox"/>	7 & 8 yr olds Coach Pitch	(As of 4/30/2019)	Age _____ \$40.00
<input type="checkbox"/>	9 & 10 yr olds	(As of 4/30/2019)	Age _____ \$45.00
<input type="checkbox"/>	11 & 12 yr olds Traditional	(As of 4/30/2019)	Age _____ \$50.00
<input type="checkbox"/>	11 & 12 yr olds "O" Zone	(As of 4/30/2019)	Age _____ \$50.00
<input type="checkbox"/>	13 & 14 yr olds	(As of 4/30/2019)	Age _____ \$50.00
Girls' Softball			
<input type="checkbox"/>	5 & 6 yr olds	(As of 8/31/2019)	Age _____ \$35.00
<input type="checkbox"/>	7 & 8 yr olds	(As of 8/31/2019)	Age _____ \$40.00
<input type="checkbox"/>	9 & 10 yr olds	(As of 8/31/2019)	Age _____ \$45.00
<input type="checkbox"/>	11 & 12 yr olds	(As of 8/31/2019)	Age _____ \$50.00
<input type="checkbox"/>	13 - 18 yr olds	(As of 8/31/2019)	Age _____ \$50.00

PLEASE NOTE:

All Participants will be in a draft system. There is no guarantee a participant will get placed on a certain team or with a certain coach. All participants in competitive age divisions will be required to play with their age group, unless approved by the Athletic Director to move up. Participants will not be allowed to move down in age divisions.

SIBLINGS:

NAME _____ AGE GROUP _____

Sumter County Recreation & Parks Release of Liability Form

My signature below gives my approval for the above to participate in any and all league activities during the 2019 Spring Baseball/Girls' Softball Season. I assume all risk and hazard incidental to such participation, **including transportation to and from all activities**; and do hereby waive, release, absolve, indemnify and agree to hold harmless the parent or local league organization, the organizers, sponsors, supervisors, participants and person transporting the child to and from activities, for any claim arising out of any injury to the child. I grant permission to managing personnel or other league representatives to authorize and obtain medical care from any licensed physician, hospital or medical clinic should the above become ill or injured while participating in league activities away from home or at other times when neither parent/guardian is available to grant authorization of emergency treatment.

Signature: _____ Print Name: _____ Date: _____

OFFICE USE ONLY

Amount Paid\$ _____ Check # _____ Cash _____ Date _____ Employee _____ Recorded in Rec Trac _____

Receipt # _____ Comments _____

2019 SKIB Baseball Dates

All meetings will be held at the Recreation Department unless stated otherwise

Tuesday	January 22		Registration Begins
Wednesday	February 13	6:00pm	Coaches Meeting (Mandatory for all Coaches)
Thursday	February 14		Registration ends for player's ages 4-Traditional (11&12 Yr. Olds)
Tuesday	February 19	5:45pm 6:45pm	Workouts for all 9 year olds at Palmetto Park (Field 2) Workouts for all 10 year olds at Palmetto Park (Field 2)
Monday	February 25	6:00pm 7:30pm	Draft for teams for 4-5 year olds (T-Ball) (Coaches only) Draft for teams for 6 year olds (Coach Pitch)
Tuesday	February 26	6:00pm 7:30pm	Draft for teams for 9 & 10 year olds (Coaches only) Draft teams for Traditional (Coaches only)
Wednesday	February 27	6:00pm	Drafting of teams for 7 & 8 year olds (Coaches only)
Monday	March 4		Practice begins for (7-12)
Saturday	March 9		Practice begins for 4 -5 (T-ball) and 6 year olds (Coaches Pitch)
Thursday	March 14		Registration ends for O-Zone (11&12 Yr. Olds)
Tuesday	March 19	6:00pm 7:00pm	Workouts for O-Zone 11 year olds at Palmetto Park (Field 6) Workouts for O-Zone 12 year olds at Palmetto Park (Field 6)
Thursday	March 21		Registration ends for & 13 – 14 year olds
Monday	March 25	6:00pm 7:30pm	Draft teams for O-Zone (Coaches Only) Draft teams for 13-14 year olds (Coaches only)
Saturday	April 6		Jamboree for 7-12 year olds at Palmetto Park
Saturday	April 6		Start games for 4-6 year olds
Monday	April 8		Start games for 7-12 year olds
April 15-22			SPRING BREAK
Monday	April 22		Start games for O-Zone & 13–14 year olds
Saturday	May 18		Season ends for 4-6 year olds
Friday	June 7		Season ends for 7-12 year olds
Friday	June 7		Season ends for O-Zone & 13-14 year olds

GIRLS SPRING SOFTBALL DATES 2019

All meetings will be held at the Recreation Department unless stated otherwise

Tuesday	January 22		Registration Begins
Wednesday	February 13	6pm	Coaches Meeting (Mandatory)
Thursday	February 14		Registration ends for 7-12 year olds
Monday	February 25	6pm	Drafting of teams for 7 & 8 year olds (coaches only)
Tuesday	February 26	6pm	Drafting of teams for 9 & 10 year olds (coaches only)
Wednesday	February 27	6pm	Drafting of teams for 5 & 6 year olds (coaches only)
Thursday	February 28	6pm	Drafting of teams for 11 & 12 year olds (coaches only)
Monday	March 4		Practice begins for 7-12 at Dillon Park
Saturday	March 9		Practice begins for 5 & 6 year olds at Dillon Park
Friday	March 29		Registration ends for 13 – 18 year olds
Saturday	April 6		Jamboree for 5 – 10 year olds at Palmetto Park
Saturday	April 6		Start games for 5 & 6 year olds
Monday	April 8		Week games start for 7 – 12 year olds
Tuesday	April 9	6pm	Drafting of teams for 13 – 18 year olds (coaches only)
	April 15-21		SPRING BREAK – NO GAMES
Monday	April 29		Week games start for 13 – 18 year olds
Saturday	May 18		Season ends for 5 & 6 year olds
Friday	June 7		Season ends for 7 - 18 year olds
Monday	June 10		Week all-star practice starts for 7 – 15 year olds

RECREATION & PARKS



155 Haynsworth St.
Sumter, SC 29150
(803) 436-2248
FAX: (803) 436-2400
recreation@sumtercountysc.org

COACHES APPLICATION - 2019 SPRING YOUTH SOFTBALL

Application must be filled out completely & PRINTED IN BLACK OR BLUE INK OR TYPED

NAME _____			
LAST	FIRST	MIDDLE	
ADDRESS _____			
STREET	CITY	STATE	ZIP
TELEPHONE NUMBER () _____ - _____ () _____ - _____			
HOME #	WORK #	FAX #	
E-MAIL ADDRESS _____			
SOCIAL SECURITY # _____ / _____ / _____		DATE OF BIRTH _____ / _____ / _____	
DRIVER'S LICENSE (STATE ISSUED) _____		(NUMBER) _____	

LIST ANY PREVIOUS YOUTH SPORTS YOU HAVE ASSISTED OR COACHED:

SPORT	POSITION	WHEN

COACHING DESIRED: *CIRCLE ONE*

HEAD COACH

ASSISTANT HEAD COACH

AGE GROUP:

CIRCLE ONE

5 & 6 Year Olds

7/8 Year Olds

9/10 Year Olds

11/12 Year Olds

13-18 Year Olds

NOTICE: Please read this carefully and sign below to indicate you have read, fully understand this notice and its contents, and agree to its terms.

It is understood and agreed that any misrepresentation or omission of information by me in this application will be sufficient for cancellation and/or separation from the league. Furthermore, I understand that just as I am free to resign at any time, the league reserves the right to cancel my coaching privileges at any time with or without prior notice.

I give the right to my employer, persons, references, organizations, and previous employers to provide any information pertinent to my being selected.

I also understand, agree to and hereby authorize a background investigation which includes a criminal record check.

SIGNATURE _____ DATE _____

RECREATION & PARKS



155 Haynsworth St.
Sumter, SC 29150
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recreation@sumtercountysc.org

COACHES APPLICATION - 2019 SPRING YOUTH BASEBALL

Application must be filled out completely & PRINTED IN BLACK OR BLUE INK OR TYPED

NAME _____			
LAST	FIRST	MIDDLE	
ADDRESS _____			
STREET	CITY	STATE	ZIP
TELEPHONE NUMBER () _____ - _____ () _____ - _____ () _____ - _____	HOME #	WORK #	FAX #
E-MAIL ADDRESS _____			
SOCIAL SECURITY # _____ / _____ / _____		DATE OF BIRTH _____ / _____ / _____	
DRIVER'S LICENSE (STATE ISSUED) _____		(NUMBER) _____	

LIST ANY PREVIOUS YOUTH SPORTS YOU HAVE ASSISTED OR COACHED:

SPORT	POSITION	WHEN
SPORT	POSITION	WHEN

COACHING DESIRED: *CIRCLE ONE* HEAD COACH ASSISTANT HEAD COACH

AGE GROUP: *CIRCLE ONE* 5 & 6 Year Olds 7/8 Year Olds 9/10 Year Olds
11/12 Year Olds 13-18 Year Olds

NOTICE: Please read this carefully and sign below to indicate you have read, fully understand this notice and its contents, and agree to its terms.

It is understood and agreed that any misrepresentation or omission of information by me in this application will be sufficient for cancellation and/or separation from the league. Furthermore, I understand that just as I am free to resign at any time, the league reserves the right to cancel my coaching privileges at any time with or without prior notice.

I give the right to my employer, persons, references, organizations, and previous employers to provide any information pertinent to my being selected.

I also understand, agree to and hereby authorize a background investigation which includes a criminal record check.

SIGNATURE _____ DATE _____

Sumter County Recreation & Parks SOFTBALL SPONSOR – SPRING 2019



Please return this invoice with your sponsor fee

Company

Contact Person

Name: _____

Name: _____

Address: _____

Phone #: (____) _____ - _____

Fax #: (____) _____ - _____

Email Address: _____

Team Sponsorship

Spring 2019 Season

\$300.00

Thank you for your support of the Sumter County Youth Softball Program.
Your involvement is vital to the success of our program!

INFORMATION AND OPTIONS

- ⇒ Returning sponsors have first choice of leagues if payment is received by February 15, 2019.
- ⇒ New sponsors will be assigned to their child's league after February 15, 2019, if provided space is available in that league. The date of check receipt determines assignment order.
- ⇒ If you **DO NOT** have a child in the program and/or **DO NOT** have a league or age preference, please check here: _____. Thank you for allowing us to assign your sponsorship to a league where sponsors are most needed.
- ⇒ I wish to support the following age group: (circle one)

5 – 6 Year Olds

7 - 8 Year Olds

9 – 10 Year Olds

11 – 12 Year Olds

13 – 18 Year Olds

If you have children in the program, please list names, and ages.

Name _____ age _____ (circle one) Boy / Girl

Name _____ age _____ (circle one) Boy / Girl

- ⇒ Sponsors logo will be placed on the front of the jersey.
Please submit a screen of your black and white logo.
- ⇒ Sponsors will receive a team jersey and a team photograph.
- ⇒ Make checks payable to: **Sumter County Recreation & Park or SCRCP**
- ⇒ Mail to: **ATTN: Youth Softball Sponsor,
155 Haynsworth St., Sumter, S.C. 29150**
- ⇒ If you have any questions, please call: **Austin Baker @ (803) 436-2248**
Or email robertabaker164@gmail.com

OFFICIAL USE ONLY

AMOUNT PD \$ _____ CA / CK # _____ DATE ____ / ____ / ____ BY: _____ RECEIPT # _____

Sumter County Recreation & Parks BASEBALL SPONSOR – SPRING 2019



Please return this invoice with your sponsor fee

Company

Contact Person

Name: _____

Name: _____

Address: _____

Phone #: (____) _____ - _____

Fax #: (____) _____ - _____

Email Address: _____

Team Sponsorship	Spring 2019 Season	\$300.00
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Thank you for your support of the Sumter County Youth Baseball Program.
Your involvement is vital to the success of our program!

INFORMATION AND OPTIONS

- ⇒ Returning sponsors have first choice of leagues if payment is received by February 14, 2019.
- ⇒ New sponsors will be assigned to their child's league after February 14, 2019, provided space is available in that league. The date of check receipt determines assignment order.
- ⇒ If you **DO NOT** have a child in the program and/or **DO NOT** have a league or age preference, please check here: _____. Thank you for allowing us to assign your sponsorship to a league where sponsors are most needed.

⇒ I wish to support the following age group: (circle one)

- | | | | |
|---------------------|------------------|-------------------|------------------|
| 5 & 6 T-Ball | 6 Year Olds | 7 - 8 Year Olds | 9 - 10 Year Olds |
| 11 - 12 Traditional | 11 - 12 "O" Zone | 13 - 14 Year Olds | |

If you have children in the program, please list names, and ages.

Name _____ age _____ (circle one) Boy / Girl

Name _____ age _____ (circle one) Boy / Girl

- ⇒ Sponsors logo will be placed on the front of the jersey.
Please submit a screen of your black and white logo.
- ⇒ Sponsors will receive a team jersey and a team photograph.
- ⇒ Make checks payable to: **Sumter County Recreation & Park or SCRP**
- ⇒ Mail to: **ATTN: Youth Spring Baseball Sponsor,**
155 Haynsworth St., Sumter, S.C. 29150
- ⇒ If you have any questions, please call: **Ryan Graham @ (803) 436-2248**
Or email rgraham@sumtercountysc.org

OFFICIAL USE ONLY				
AMOUNT PD \$ _____	CA / CK # _____	DATE ____ / ____ / ____	BY: _____	RECEIPT # _____