

**The Village of Island Lake Recreation Department
T-Ball/Baseball Registration Form 2019**

\$55-resident/\$60-non resident
Starting times may vary depending upon enrollment

4 - 6 yrs **Thursdays**

T-Shirt size Child: S ___ M ___ L ___ Adult S ___ M ___

Make sure you mark correct t-shirt size; and your name is spelled correctly. We will be ordering trophies and shirts from the information you provide. The Recreation Department is not responsible and will not make any adjustments due to incorrect size or incorrect spelling.

\$55 – RESIDENT/\$60-NON-RESIDENT

PRINT INFORMATION CLEARLY

Childs name: _____

Address: _____

City/Zip: _____

Phone #: _____

Childs Birthdate: _____ **Age:** _____ **M/F** _____

Parents Name: _____

Emergency Phone: _____

Special Requirements: _____

E-Mail Address: _____

YES, I would like to coach/asst. coach

Name: _____

Call Island Lake Recreation Department (847) 416.7866) or email:lori.tanzillo@voislk.com

During the session, there may be times when you or your child/children will be photographed. These photos may be used for decorating our bulletin board or other publicity purposes.

_____ I understand that my child/children may appear in photos for this activity and give permission for this.

_____ I do not give permission for my child/children's pictures to be used.

Liability and Agreement Waiver

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in the Village of Island Lake Parks and Recreation Program, you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of the activities of this program.

"I recognize and acknowledge that there are certain risks of physical injury to participants in programs and I agree to assume the full risk of any such injuries, damages or loss regardless of severity which I or my child/ward may sustain as a result of participating in any activities connected or associated with any such program."

"I agree to waive and relinquish all claims I or my child/ward may have as a result of participating in the program against the Village of Island Lake and its officers, agents, servants, and employees."

"I do hereby fully release and discharge the Village of Island Lake and its officers, agents, servants, volunteers and employees from any and all claims resulting from injuries, damages, and losses sustained by me or by my child/ward, and arising out of, connected with, or in any way associated with the activities of any of the program(s)."

"All fees are due prior to the start of class. The Village of Island Lake reserves the right to deny admission to any child whose fees are not paid in accordance with this agreement. Any unpaid fees is subject to a \$5.00 late fee after the classes start, unless prior arrangements have been made with the administrator. By signing the front of this form you agree to pay all late fees, class fees, court costs and attorney's fees incurred by the Village of Island Lake in enforcing any of the terms of this agreement."

"I have read and fully understand the above release and waiver." Your signature is required on the other side of this form.

Please Send or Bring to:
The Village of Island Lake
Recreation Department
3720 Greenleaf Ave.
Island Lake, IL 60042
Phone: (847) 416-7866

Signature: _____

Date _____

My signature below as Participant or Parent/Guardian if Participant is under the age of 18 years indicates that I have carefully read and understand the liability and agreement waiver on the reverse side of this form

All refund requests will incur a \$10 handling fee no exceptions.

OFFICE USE ONLY:Date	Check / Cash	\$	O	B
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