

# 2024 Walk-In Baseball Registration Form

## 2024 Baseball Registration Form

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FOLEY PARKS AND RECREATION YOUTH BASEBALL

### **Baseball Information:**

**\*\*Notice: Players currently on a high school baseball team roster are not permitted to register for recreation baseball.\*\***

**Your child will register based on the age they will be on May 1, 2024.**

Foley Parks and Recreation will provide uniforms and equipment (bats, helmets, balls, and catchers equipment) for each team. Registration fees must be paid in full in order for your child to receive his uniform. You will need to purchase the following items:

- Glove
- Cleats
- Male Catchers Cup
- Bat (if you prefer your own, it must have a USA stamp and be 2 5/8 inch barrel or smaller)
- Batting Helmet (if you prefer your own, 6U-10U require face guards)

Your coach will contact you to let you know when you will have your first practice.

Practices will be 1-3 days a week, until games start. Once games begin, your practice schedule will depend on your game schedule. Teams are not allowed to meet more than 3 days a week or at any locations not approved by the Foley Parks and Recreation Department. No games or practices will be scheduled on Wednesdays, Saturdays or Sundays with the exception of the games played on Opening Day.

In the event of rain, we will make a decision no sooner than 4:00pm to cancel games/practices. Coaches will be notified immediately and be responsible for passing that information along to their team. We will also post information on our Foley Parks and Recreation Facebook page.

**If your child has never participated in any City of Foley sports programs, a copy of their birth certificate will be required for them to register. \*\*A copy of the birth certificate must be dropped off, emailed, or mailed to us before the season starts at the Foley Parks and Recreation Office located at 121 N. Alston Street or your child will not be allowed to play. The email address is [kellis@cityoffoley.org](mailto:kellis@cityoffoley.org).\*\***

### **Parents,**

**Please print all of the information neatly so that it is legible. It is important that we are able to read and input the information correctly.**

**Thank you!**

**Foley Parks and Recreation Department**

**Is your child new to Foley Parks and Recreation Youth Sports Program? (Required):**

*(Select only one option)*

*If your child has never registered to play sports with the Foley Parks and Recreation Department please select Yes.*

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- Yes, my child is new.  
He/she has never participated in any the Foley Recreation Youth Sports Programs.
- No, my child is not new.  
He/she has participated in the Foley Youth Sports Programs before.

**Child's First and Last Name (Required):** \_\_\_\_\_

*As it appears on his/her birth certificate*

**Gender (Required):**

*(Select only one option)*

- Male
- Female

**Child's name as it should appear on trophy:** \_\_\_\_\_

**Date of birth (Required):** \_\_\_\_\_

**Age on May 1, 2024:** \_\_\_\_\_

**How many years has your child played baseball? (Required):** \_\_\_\_\_

**What is your child's previous coach's name? (Required):** \_\_\_\_\_

*Write N/A if your child has never played and write don't remember if you don't remember their previous coach's name.*

**Has your child ever played travel ball? (Required - Select at least one option):**

- Yes
- No

**Is your child currently playing travel ball? (Required - Select at least one option):**

- Yes
- No

**If they have played travel ball, how many years did they play? (Required):** \_\_\_\_\_

*If your child has never played travel ball write N/A.*

**Shirt Sizes (Required):**

*(Select only one option)*

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- |  |  |
|--|--|
| <input type="checkbox"/> Youth S (6-8)   | <input type="checkbox"/> Youth M (10-12) |
| <input type="checkbox"/> Youth L (14-16) | <input type="checkbox"/> Adult S         |
| <input type="checkbox"/> Adult M         | <input type="checkbox"/> Adult L         |
| <input type="checkbox"/> Adult XL        | <input type="checkbox"/> Adult XXL       |

**Pant Sizes (Required):**

*(Select only one option)*

- |  |  |
|--|--|
| <input type="checkbox"/> Youth S (6-8)   | <input type="checkbox"/> Youth M (10-12) |
| <input type="checkbox"/> Youth L (14-16) | <input type="checkbox"/> Adult S         |
| <input type="checkbox"/> Adult M         | <input type="checkbox"/> Adult L         |
| <input type="checkbox"/> Adult XL        | <input type="checkbox"/> Adult XXL       |

**Sock Sizes (Required):**

*(Select only one option)*

- Small
- Medium
- Large

**Parents Initials to Confirm Sizes (Required):**

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**Please list any medical conditions that the coaches need to be aware of (Required):**

*If your child does not have any medical conditions or allergies please write "None".*

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**Please note any special request here:**

*\*\*Please note requests are not guaranteed for coaches, teammates, sponsorships, etc.\*\**

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**Are you interested in being a Head Coach? (Required - Select at least one option):**

- Yes
- No

**Are you interested in being an Assistant Coach? (Required - Select at least one option):**

- Yes
- No

**Are you interested in officiating? (Required - Select at least one option):**

- Yes
- No

**Are you interested in sponsoring a team? (Required - Select at least one option):**

- Yes
- No

If you are interested in being a sponsor, please complete and submit the sponsorship form on RecDesk no later than February 26, 2024.

If you are interested in coaching, please complete the online form found on RecDesk.

Please email [shavel@cityoffoley.org](mailto:shavel@cityoffoley.org) or [rlzauskas@cityoffoley.org](mailto:rlzauskas@cityoffoley.org) if you are interested in officiating or have any further questions.

**Player's Name (Required):** \_\_\_\_\_

**Date (Required):** \_\_\_\_\_

**Parents First and Last Name(s) (Required):** \_\_\_\_\_

**Address (Required):**

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

Address Line 2: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**Where do you live (Required):**

*(Select only one option)*

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- Inside City Limits  
 Inside Police Jurisdiction  
 Outside Police Jurisdiction

**Email (Required):** \_\_\_\_\_

*If you do not have an email address write n/a@yahoo.com*

**Primary Phone # (Required):** (        ) - \_\_\_\_\_

**Emergency Contact Person's Name (Required):** \_\_\_\_\_

*Who should we call if we can't reach you?*

**Emergency Contact Person's Phone # (Required):** (        ) - \_\_\_\_\_

**Please Opt-In to receive text message notifications concerning our baseball program (Required - Select at least one option):**

*Please accept the text message option as we believe it will give us the ability to communicate important information in a more timely manner. We will only use text messaging to communicate with you regarding practice, time changes and cancellations.*

- Yes, I Opt-In to receive text messages.  
 No, I do not want to receive text messages.

**Who is your cell phone carrier? (Required):** \_\_\_\_\_

**Parent's signature (Required):** \_\_\_\_\_

Date: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Cash/Check# \_\_\_\_\_  
Receipt# \_\_\_\_\_

Employee Initials \_\_\_\_\_

## Please create your RecDesk Username.

*An account will be created for you on RecDesk so that you can register your child/children for future sports programs online. You will simply log go to [foleyrecreation.recdesk.com/Community/Home](http://foleyrecreation.recdesk.com/Community/Home), click login and type in your username and password to access your account.*

Username: \_\_\_\_\_

*\*We will send an email with your user name and temporary password. We would suggest changing your password. To do so when you click login and type in your username then click "Forgot Password" to reset your password.\**

**Parents first and last name:** \_\_\_\_\_