Eastman – Dodge County Recreation Department

P.O. Box 4393 ● Dublin Highway
Eastman, Georgia 31023
(478) 374-4696 ● (478) 374-4695

Registration Form

Child's Name:_____
Last First Middle

Shirt Size (Please Circle One) YS YM YL AS AM AL AXL AXXL

Date of Birth:_____/_____/_____ Male:_____ Female:_____ Age_____
Month Day Year

Home Address: _____

School Attending: _____ Do you live in City_____County_____

Insurance Company: _____ Allergies/Handicaps: _____

Parent/Guardian: _____

Work Phone: _____ Home Phone:_____

Emergency Phone (Not Home Phone): _____

Please give name of brother/sister playing: _____
_____

PLEASE CHECK SPORT CHILD WILL BE PARTICIPATING IN:

Baseball___ Basketball_____ Coach Pitch _____ Football_____
Softball___ T-Ball _____ Cheerleading_____ Soccer__

AGE GROUPS SUBJECT TO CHANGE ACCORDING TO REGISTRATION

AGE ON MAY 1ST OF THIS YEAR	**AGE ON JANUARY 1ST OF THIS YEAR**
T-Ball (3-4)_____	T-Ball (3-4)_____
Coach Pitch (5-6)_____	Coach Pitch (5-6)_____
Jr. Midget Boys (7-8)_____	Girls Pitching Machine (7-8)_____
Midget Boys (9-10) _____	Girls Pitching Machine (9-10) _____
Midget Boys (11-12) _____	Girls Fast Machine (11-12)_____
Junior Boys (13-14) _____	Girls Fast Machine (13-14)_____

Based upon consideration of my child being allowed to participate in this program I hereby agree:

A: That I authorize my child to participate in the program;
B: That I understand injuries occur;
C: That I release the coach, his staff, and the Eastman/Dodge Rec. Dept. from liability as result of an injury to my child;
D: That I authorize the Coach of the Eastman/Dodge Rec. Dept. to seek emergency medical attention if an injury occurs

PARENTS would you like to volunteer to help coach? _____

Recreation insurance is available. This is a voluntary plan. If interested, ask for a copy of the Enrollment Plan

_____
Parent/Guardian Signature Date Receipt #