

Joint Recreation Commission  
Village of Greene, Town of Greene & Town of Smithville  
**2021 Softball/T-Ball Form**

Child's Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent/Guardians: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Would you be interested in helping with one of the following? (All checks are payable to JRC T-Ball/Softball Program)

\_\_\_\_\_ \$10 donation per player for uniform and equipment

\_\_\_\_\_ \$25 business donation for equipment

\_\_\_\_\_ \$60 half sponsorship- name: \_\_\_\_\_

\_\_\_\_\_ \$120 full sponsorship- name: \_\_\_\_\_

\_\_\_\_\_ Coaching- name and phone number \_\_\_\_\_

**Child Shirt Size (Circle One)**

**Youth**      **XS(4/5)**      **S(6/8)**      **M(10/12)**      **L(14/16)**

**Adult**                      **S(34/36)**      **M(38/40)**      **L(42/44)**      **XL(46)**

**Important Information :**

- Please return this form by March 26th, 2021 by mailing it to: JRC Softball/T-ball, 51 Genesee Street, Box 129, Greene NY 13778

**OR**

- Return to school drop boxes.
- For softball- Majors league is U12; Minors league is U10.
- For Tee-Ball- Pre-Kindergarten, Kindergarten and 1<sup>st</sup> grade. Players need to be 4 years old by December 1, 2020.
- Any questions call Chris Kirchbaum, JRC softball/T-ball director at 585-739-4167.

Thank you for all of your support.

We permit our child to participate in the practices, games and other activities of the JRC Softball/T-Ball League. We agree not to hold JRC, its Recreation Director, Sponsors, Coaches, or Umpires responsible for any injuries sustained by our child during participation in these practices, games or other activities.

Medical Conditions, allergies, etc. \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**In order to maximize the safety of all involved, before participating in each practice or game all players (or parents on behalf of players), coaches and officials will need to be able to answer no to each of these questions:**

- 1) Within the last 14 days have you traveled to a state that is currently on the New York State list for required traveler quarantine?
- 2) Within the last 72 hours have you had any cough, fever, shortness of breath or difficulty breathing?
- 3) Within the last 14 days have you tested positive for COVID-19, or come into contact with an individual that has tested positive for COVID-19?