

2018 BASEBALL & SOFTBALL

Registration deadline February 26, 2018

Important Information—Please complete the form on the opposite side in ink and return to the Recreation Department by the deadline. If you mail in the form your envelope must be post dated by the deadline. Any incomplete forms or forms received after the deadline will be sent back. No reimbursements will be made after March 16, 2018. Any reimbursement made prior to this date is subject to a 10% administrative fee. All divisions are open to Middlesex Borough residents only.

Missed the deadline? If you missed the deadline please contact the recreation department and request that your child be put on the waitlist. If/when a spot becomes available you will be notified and have a limited amount of time to register your child with a \$10 late fee added to the regular fee.



CRITERIA AND FEES



LIL' SLUGGERS BASEBALL

- Boys and Girls
- *NEW FOR 2018* Ages 4– Kindergarten
- Registration Fee \$35.
- Games on Saturday's. Practices are once per week to coaches discretion.

SMALL GIRLS SOFTBALL

- Girls - Grades 1st & 2nd
- Registration Fee \$35.
- Games on Saturday's. Practices are once per week to coaches discretion.
- If enrollment is low girls may play in an intertown league with Dunellen

SMALL FRY BASEBALL

- Boys - Grades 1st & 2nd
- Registration Fee \$35.
- Games on Saturday's. Practices are once per week to coaches discretion.
- Depending on enrollment, teams may play in an intertown league with Dunellen.

JUNIOR LEAGUE GIRLS SOFTBALL

- Girls - Grades 3rd—5th
- Registration Fee \$45.
- Games may be during the week or Saturdays. Practices are once per week to coaches discretion.
- If enrollment is low girls may be divided by certain grades and play in an intertown league facilitated by Somerville Baseball/Softball Inc. They may have away games in local municipalities like Dunellen, Bound Brook, Manville, Somerville, etc.

FARM LEAGUE BASEBALL

- Boys - 3rd-5th and also 6th-8th
- Registration Fee \$45.
- Games may be during the week. Practices are once per week to coaches discretion.
- Depending on enrollment teams may play in an intertown league OR run like a clinic/camp with a consultant.

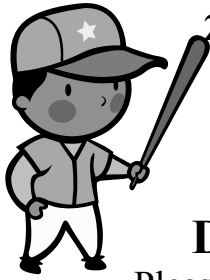
MAJOR LEAGUE SOFTBALL

- Girls - Grades 6th—8th
- Registration Fee \$55.
- Games may be during the week. Practices are once per week to coaches discretion.
- Depending on enrollment teams may play in an intertown league— see Junior League info box.

WE NEED VOLUNTEER COACHES

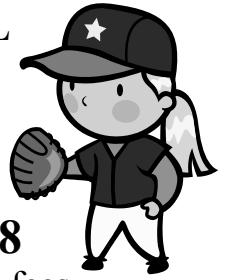
We cannot begin the season unless each team has a minimum of two volunteer coaches. All volunteers must complete the Rutgers S.A.F.E.T.Y. course and be fingerprinted. We will cover the cost of both requirements. If you are interested but have questions please call us or email: recreation@middlesexboro-nj.gov

NOTE: All age/grade criteria listed above may be subject to change based upon enrollment.



**2018 MIDDLESEX RECREATION BASEBALL & SOFTBALL
ONE FORM PER CHILD—ONE CHECK PER FAMILY
PAYABLE TO MIDDLESEX RECREATION DEPT.**

You can drop off or mail to: Middlesex Recreation Dept.
1200 Mountain Avenue, Middlesex, NJ 08846



DEADLINE TO REGISTER FEBRUARY 26, 2018

Please circle league below. See back for league guidelines & registration fees.

LIL' SLUGGERS - SMALL FRY - FARM LEAGUE

SMALL GIRLS - JUNIOR LEAGUE - MAJOR LEAGUE

NAME _____ GRADE _____ AGE _____ (circle one) BOY / GIRL

ADDRESS _____ PHONE _____

DATE OF BIRTH ____/____/____ SCHOOL _____

YES, I WOULD BE INTERESTED IN COACHING THIS YEAR _____
Name and daytime phone# _____ Coaches Shirt Size _____

MAJOR LEAGUE PARTICIPANTS ONLY: Please circle shirt & pant size.

Circle: SHIRT SIZE (adult) S M L XL 2XL PANT SZ. (adult) S M L XL 2XL

Dates during which release is granted - From: 3/1/18 To: 6/30/18

TO WHOM IT MAY CONCERN:

As a parent and/or guardian of _____, a minor, I herewith authorize the treatment by a qualified and licensed medical doctor in the event of a medical emergency which, in the opinion of the attending physician, may endanger his or her life, cause disfigurement, physical impairment or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me.

Parent(s)/Guardian Info:

Parent Name _____ address (if different from above) _____ Cell Phone _____

Parent Name _____ address (if different from above) _____ Cell Phone _____

Contact e-mail _____

Other Contact in case of emergency (DO NOT USE YOURSELF): Hospital Preference _____

Name _____ Phone _____ H / C / W Relation to child _____

Specific medical allergies, chronic illness or other medical conditions the staff should be aware of:

This release form is completed and signed of my own free will with the sole purpose of authorizing medical treatment under emergency circumstances in my absence. I confirm that my child is up to date on all immunizations as required by the NJ Dept. of Health and Senior Services Annual Immunizations Report. I also agree that all the information provided is correct and factual. If information is found to be false, I understand that my child will be expelled from program without reimbursement of fees paid. I CONFIRM THAT I HAVE RECEIVED AND WILL ABIDE BY THE SPECTATOR POLICY.

Parent/Guardian Signature _____ Date: ____/____/____

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|---|--------------------|--------------------|---------------------|
| DO NOT WRITE IN THIS BOX - for office use only | | | |
| \$35 REG PD. _____ | \$45 REG PD. _____ | \$55 REG PD. _____ | \$10 LATE FEE _____ |
| DATE RCV'D _____ | RECEIPT # _____ | | |