

2019 PEE-WEE CLINIC & LEAGUE (Kindergarten – 2nd Graders)

Participant's Name: _____ Birthdate: _____ Age: _____

Name of Parent: _____ Grade as of September 1 _____

Address: _____ City _____ Zip _____

Phone: (____) _____ Email: _____

Which church are you attending? _____

Participants must attend a church worship and Sunday School. Participants must wear tennis shoes while participating. NO slippers/sandals or non-athletic shoes will be allowed.

As with any sport activities, injuries may occur. The whole volunteer based coaching staff and FCBC - Walnut can not be held responsible for such injuries. With my signature, I acknowledge that I will cover any medical expenses for my child through our own insurance.

Signature of Parent: _____ Date: _____

If your child has any physical/medical conditions that would limit their participation, please let the head coach know before participation.

Preliminary dates are: Jan. 13th, Jan. 20th, Jan. 27th, Feb. 3rd, Feb. 10th, Feb. 24th, Mar. 3rd, Mar. 10th, Mar. 17th, Mar. 24th, and Mar. 31st. It is subject to change due to other church functions.

All sessions will be held on Sunday afternoon from 1 – 2 pm.

Registration is \$50.00 per player. Payment must be made when registering. Cash or checks are welcomed. Check should be made out to: FCBC – Walnut.

FOR OFFICE USE:

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