

# 2017 ST. GEORGE INTRAMURAL TEEBALL/COACHES PITCH



## DK-1<sup>st</sup>

Intramural TEEBALL/COACHES PITCH registration is being held now! Teams are tentatively scheduled to play every Saturday morning at St. George from March 11<sup>th</sup> thru April 8<sup>th</sup> (5 games). Practice days/ times are at the coach's discretion. Forms will be accepted in the office until the end of the school day on **FRIDAY FEBRUARY 3, 2017. NO LATE FORMS WILL BE ACCEPTED!** Fee is \$25.00 per player made payable to the St. George Athletic Association and must accompany registration form for processing. Team shirts & end of the season award medals will be provided; parents are responsible for other equipment. Parent shirts are also available at \$10 each. You will be contacted by email by your coach before the season starts. Please double check the registration form for accuracy. Questions should be directed to Kaitlin Corry at [intramurals@sgschoolbr.org](mailto:intramurals@sgschoolbr.org) . We are in need of **coaches/assistant coaches**. Coaches must be cleared by the school office as compliant volunteers. There will be an informational coaches meeting before the start of the season.

-----please detach and return bottom half with payment, keep above for your records-----

### **TEEBALL/COACHES PITCH 2017**

PLEASE PRINT OR TYPE NEATLY IN INK (ONE FORM PER PLAYER). **Form is due by 02/03/2017**

STUDENT'S NAME \_\_\_\_\_ GRADE/SECTION \_\_\_\_\_ BOY/GIRL \_\_\_\_\_

STUDENT'S SHIRT SIZE (CIRCLE ONE)      YS (6-8)      YM (10-12)      YL (14-16)  
    Adult Small      Adult Medium      Adult Large

PARENT NAMES (MOM) \_\_\_\_\_ (DAD) \_\_\_\_\_

PARENT TELEPHONE (HOME) \_\_\_\_\_ (MOM) \_\_\_\_\_ (DAD) \_\_\_\_\_

EMAIL ADDRESS (MOM) \_\_\_\_\_ (DAD) \_\_\_\_\_

OPTIONAL PARENT SHIRT(S) - \$10 EACH (**SEND PAYMENT WITH FORM**)-QUANTITY \_\_\_\_\_ SIZE \_\_\_\_\_

PARENT CONSENT: Parents are responsible for their own insurance. We understand this should relieve St. George and the coaches from financial responsibility resulting from injury.

PARENT SIGNATURE:

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PLEASE CHECK IF INTERESTED IN COACHING \_\_\_\_\_

NAME \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_