

MICHEAL HINES, PARKS & RECREATION DIRECTOR

**MORTON PARKS & RECREATION**  
P.O. BOX 555  
2024 BASEBALL REGISTRATION  
**DEADLINE FOR REGISTRATION 02/23/24**

BASEBALL (7-12) (\$90.00)    SOFTBALL (7-12) (\$90.00)    T-BALL (3-6) (\$75.00)

NAME \_\_\_\_\_ AGE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_

WORK \_\_\_\_\_

**PLEASE RETURN REGISTRATION FORM TO CITY HALL OR  
MAIL CITY OF MORTON, P.O. BOX 555, MORTON, MS 39117**

CIRCLE ONE: **SHIRT SIZE:**

YOUTH: S M L XL

ADULT: S M L XL

**PANT SIZE:**

YOUTH: S M L XL

ADULT: S M L XL

MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

**ATTENTION : A COPY OF BIRTH CERTIFICATE WILL BE NEEDED IF IT IS YOUR  
CHILDS 1<sup>ST</sup> YEAR OF REGISTRATION**

I HEREBY GIVE MY PERMISSION FOR MY CHILD TO PARTICIPATE IN THE MORTON PARKS & RECREATION DEPT. PROGRAM. I GIVE MY PERMISSION FOR MY CHILD TO TRAVEL TO GAMES OUT OF TOWN (IF NECESSARY). I RELEASE THE MORTON PARKS & RECREATION DEPT. AND ITS DESIGNATED LEADERSHIP FROM ACCIDENT OF LIABILITY. I UNDERSTAND THAT I WILL NOT ALWAYS AGREE WITH THE COACHES AND REFEREE BUT WILL PLEDGE TO CONDUCT MYSELF IN A MANNER OF GOOD SPORTSMANSHIP SO THAT THE CHILDREN WILL NOT BE NEGATIVELY INFLUENCED BY MY ACTIONS.

\_\_\_\_\_  
PARENT OR GUARDIAN SIGNATURE

**\*NO FORMS WILL BE ACCEPTED WITHOUT PAYMENT**

PAID BY: CASH \_\_\_\_\_ MONEY ORDER \_\_\_\_\_ CHECK \_\_\_\_\_ RECEIPT # \_\_\_\_\_

ARE YOU INTERESTED IN COACHING? \_\_\_\_\_ YES. PHONE # \_\_\_\_\_