



# Jay Community Center

## 2017 Boomer Coach's Pitch/T-Ball

(Boys & Girls Ages 3, 4, 5 & 6)



### WHAT:

Boomer Summer T-Ball outdoor program for boys & girls  
Ages 3-6 by June 1, 2017  
(3&4 year olds 5&6 year olds if numbers work)

### WHEN:

Games will played on Saturday early afternoons and make ups Sunday afternoons  
**6/3, 6/10, 6/17, 6/24, 7/8**  
**Tournament 7/15 & 7/16**

### WHERE:

Games will be played at the Sportland Fields

### Cost: \$50.00

On or Before **Monday, May 14, 2017**  
**Non-Refundable Fee**  
**\*\*\*Cost includes Boomer T-Ball Shirt & Hat\*\*\***

**\*\*\*Participate in JCC's Scholarship Program and Play for Free\*\*\***  
**Forms & Info Available at JCC!!**

### Boomer T-Ball Clinic:

**\*\*\*At JCC\*\*\***  
Monday 5/14/17  
Ages 3-4 5:00-6:00pm  
Ages 5-6 6:00-7:00pm

### Picture Day:

Pictures will be taken during the 2nd game prior to the scheduled starting time  
**TIMES TO BE ANNOUNCED!**

### Draft Day - 5/16/17 (coaches ONLY)

**\*\*\*At JCC\*\*\***  
Ages 3-4 5:30-6:15  
Ages 5-6 6:15-7:00

(Please cut along this line and return the lower portion to the Jay Community Center)

## 2017 Boomer Coach's Pitch / T-Ball Registration Form



Name: \_\_\_\_\_ M/F \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_  
(Date of Birth)

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Shirt Size: YS (6-8) YM (10-12) YL (14-16) AS AM AL AXL

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Required Required

Other Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Required

**PARTICIPANT RELEASE:** I hereby grant permission for my child to participate in the Jay Community Center 2017 Boomer Summer T-Ball Program. Further, I agree to hold harmless & release the center, directors, officials, & coaches from any & all liability related to this program. JCC reserves the right to use photographs for any promotional material.

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

Would you or a family member or a friend like to consider coaching? YES or NO

If Yes, what is the name (and best way to contact) of Prospective Coach (Name): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Required Required

Shirt size for coach (please circle one): AS AM AL AXL AXXL AXXXL AXXXXL

### Office Use Only:

Fee Paid (Y/N) \_\_\_\_\_ Amount Paid \_\_\_\_\_ Date \_\_\_\_\_ Charge, Check, or Cash \_\_\_\_\_ Employee \_\_\_\_\_ Receipt # \_\_\_\_\_

Registration \$ \_\_\_\_\_ Cookie \$ \_\_\_\_\_ Credit \$ \_\_\_\_\_ Balance Owed \$ \_\_\_\_\_

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