



# ALGONA RECREATION DEPARTMENT

## 2nd-6th Grade

### TRAVELING LEAGUE

### YOUTH BASEBALL & SOFTBALL

### REGISTRATION

It's time for all kids **currently** in 2nd through 6th grades to sign up for the **Algona Recreation Department Youth Baseball and Softball summer program**. We are a part of a traveling league with Emmetsburg, Ruthven and Graettinger. Volunteer coaches are used at all age levels. We need as many coaches as possible so please consider coaching and complete the information below if interested.

Practices will begin in early May and are held at the convenience of the volunteer coaches. Each team will play a 5 week season, 2 games per week beginning the week of May 24 through June 24. Game times are 6:00 & 7:15 PM. All games in Algona will be played at either Central Park or Veterans Park. A season ending tournament for 3<sup>rd</sup> through 6<sup>th</sup> grade teams will be held June 25 & 26 in Emmetsburg. Parents are responsible for transportation of their children to and from the games.

Leagues will be split as follows. **Grades refer to current 09/10 school year.**

- 2<sup>nd</sup> grade (coach pitch)
- 3<sup>rd</sup> & 4<sup>th</sup> grade
- 5<sup>th</sup> & 6<sup>th</sup> grade



If you would like to play ball this summer please fill out the form below and either **MAIL IT OR DROP IT OFF** along with a **\$18** registration fee to the:

**ALGONA REC. DEPT.  
112 W. CALL  
ALGONA, IA 50511**

**REGISTRATION DEADLINE IS FRIDAY, MARCH 5.** If you have any questions, call the Rec. Dept. office in City Hall at 295-9251.

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**ALGONA RECREATION DEPARTMENT  
BASEBALL & SOFTBALL REGISTRATION  
COST: \$18**

NAME \_\_\_\_\_ BOY \_\_\_\_\_ GIRL \_\_\_\_\_

ADDRESS \_\_\_\_\_ **CURRENT GRADE** \_\_\_\_\_

CITY & ZIP \_\_\_\_\_ EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

RELEASE AND INDEMNIFICATION AGREEMENT

I hereby request that you accept my child's application for registration in this Algona Recreation Department program. With consideration of your acceptance of my child, I hereby release the City of Algona, its employees and volunteers associated with this program from all claims that may arise in the event my child is injured in an accident that occurs while he or she is participating in this program. I also acknowledge that it is my responsibility, not the responsibility of the City of Algona, to provide medical insurance in the event I desire to have medical insurance coverage for my child while he or she participates in this activity.

\_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_  
Date

**Volunteer coaches will be needed. Please check here if you are interested in coaching and give us your contact information.**

Name \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_

Some limited financial assistance is available, but it will not fully fund your child's participation fee. If you desire financial assistance please consider partial payment and check the box.

**\*REGISTRATION DEADLINE, FRIDAY, MARCH 5\***