



CEA Athletics 2019-2020

Program Registration Notice: Intramural T-Ball

Program Name:	Intramural T-Ball
Eligible Grades/Ages:	K4 - First Grades
Start Date:	September 16 through November 23
Fee:	\$250 (includes uniform and practice shirt)
Practice & Game Days:	Practices - Mondays and Wednesdays, 3:00pm to 3:45pm Games - Every Other Saturday morning beginning October 12
Try-outs:	Not required. Registration is on first-come, first-served basis. Limit of 30 students.

Important program details

All students are required to have a glove. The students name should be written on every piece of equipment (glove, cap, shirts, and uniform). T-ball participation is limited to 30 students (first come...first served) combined in K4 through First Grade.

Uniforms are distributed by Baseball World and all students must go in person for a fitting by September 16th. Baseball World also offers apparel for family and friends which may be purchased separately at the time of fitting. Baseball World is located at 9590 S.W. 40th Street, Miami, FL 33165.

Changes made to the schedule and any game-day updates will be sent out via text. Please ensure that the office has a correct cellular number where you may be reached.

Registration information

To register for this program, please complete the attached registration form and return it along with payment to Adrian Izquierdo in the main office no later than Wednesday, September 11. In addition, an updated Parental Consent/Medical Clearance Form must also be submitted to the office in order for any student to participate.

If you have any questions, please feel free to contact Coach Carlos Salvat at csalvat@conchitaespinosa.com.



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Program Registration Form: Intramural T-Ball

Student's Name: _____ Grade _____ Age ____

Teacher: _____ Birthdate: _____

Home phone: _____

Primary E-mail (please print clearly) _____

Primary Cell number for text updates _____

Shirt Size: _____ (XS, S, M, L, or XL. Please indicate if size is Youth or Adult)

WAIVER AND RELEASE: I (We) hereby give my (our) approval to my (our) child's participation in this activity and hereby, release, indemnify, and hold harmless Conchita Espinosa Academy, Inc., its staff and employees, by reason of my (our) child's participation in said program.

Parent's signature _____ Date: _____

Please return completed registration form to Adrian Izquierdo in the office along with the registration fee before the first practice.



OFFICE USE ONLY:

Date Received: _____

Payment Received: _____