

**Leitchfield 2020 Boys Softball Registration Form**  
**Leitchfield City Hall – PO Box 398, Leitchfield, Ky. 42755-0398**  
**270-259-4034**

**Player Information**

**Check One**

\_\_\_\_\_  
 Last Name                      First Name                      M  
**Age before Jan 1<sup>st</sup>** \_\_\_\_\_

Grade:  
 8<sup>th</sup> \_\_\_\_\_ 9<sup>th</sup> \_\_\_\_\_ 10<sup>th</sup> \_\_\_\_\_ 11<sup>th</sup> \_\_\_\_\_ 12<sup>th</sup> \_\_\_\_\_

\_\_\_\_\_  
 Birthday (mm/dd/yyyy) \_\_\_\_\_

\_\_\_\_\_  
 Season starts last week of April & lasts for 9 weeks

**Home Address:**

**Would you like to coach?**    YES        NO

\_\_\_\_\_  
 House #    Street

**Uniform Size (circle one)**

YM (10-12)    YL (14-16)    AS    AM    AL    AXL    AXXL

\_\_\_\_\_  
 City, State, Zip

**Note:** If mailing registration form.

Mail Check or Money order to:

**Leitchfield City Hall**  
**PO Box 398, Leitchfield Ky 42755**

\_\_\_\_\_  
 Cell Phone                                      Home Phone

**Make Checks Payable to City of Leitchfield**

**Do you receive text messages?**    YES        NO

**Primary Contact Information**    Relationship: \_\_\_\_\_

\_\_\_\_\_  
 Last Name                      First Name                      Home Phone                      Cell Phone

**Alternate Contact Information**    Relationship: \_\_\_\_\_

\_\_\_\_\_  
 Last Name                      First Name                      Home Phone                      Cell Phone

**The undersigned agrees to indemnify and hold harmless the City of Leitchfield and their agents and employees from and against all claims, damages, losses and expenses of any nature or description arising out of use of the premises by any person whatsoever.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Total Due**                      **Check #** \_\_\_\_\_ **Check Amount:** \_\_\_\_\_ **Cash:** \_\_\_\_\_

<b>1 Child/ 1 Adult</b>	<b>\$40.00</b>
<b>2 Children/Adults</b>	<b>\$70.00</b>
<b>3 Children/Adults</b>	<b>\$90.00</b>

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Players Name: \_\_\_\_\_ Age: \_\_\_\_\_

**Note: FILL OUT ONE REGISTRATION FORM PER PLAYER.**

