



2021 City of Wells Baseball & Softball League



The City of Wells Park Recreation Department wants your participation in summer softball and baseball to be a positive experience. Only through your input can the programs be improved. If you have comments or questions, please contact Wells City Hall (553-6371), Toby Anderson (507-402-5084) or Ryan Crabtree (507-720-1260). This program is offered for all youth in the USC communities completing 2nd, 3rd and 4th grade that want to play softball and baseball.

- The Season will start the approximately the week of May 17th.
- Girls softball is played Mondays or Wednesdays.
- Boys baseball 2nd grade is on Monday or Wednesday and 3rd grade is on Tuesday or Thursday nights beginning the week of May 17th. One game per week.
- Games start at 6:15 PM
- Shirts will be provided for all players
- A 2 hour time limit is in effect for all games. There are 3 outs or the 7 run rule. The last inning is unlimited runs.
- Information about this league will be posted on the City's website once it is available. www.cityofwells.net.
- Coaches & Umpires are needed. If you are interested, please call Toby(507-402-5084) or Ryan(507-720-1260).
- In-person registration is Saturday, May 8th from 8am-noon at Wells City Hall or drop off at City Hall.

The Registration Deadline to get your player form & fee of \$35.00 sent in is May 10th.

**CHECK THE CITY OF WELLS WEBSITE & FACEBOOK
FOR ANY CHANGES THAT MAY HAPPEN DUE TO COVID-19**

(Return this portion to City Hall with payment)

**2021 Baseball Sign Up 2nd & 3rd (Boys)
Softball Sign Up – 2nd, 3rd & 4th Grade (Girls)
THE FEE FOR BASEBALL & SOFTBALL IS \$35.00**

Circle the grade bracket you will be participating in:

Boys Baseball 2 3 (Grade Completed)

Girls Softball 2 3 4 (Grade Completed)

****Circle the Shirt size:** Adult: S M L XL Youth: S M L XL

_____ M F _____
Name Parent/Guardian Name

_____ Phone Number _____ Email Address

Are You Willing to Help Coach? Y N

_____ Is This Your First Time Coaching Baseball or Softball? Y N
Name

_____ Phone Number _____ Email Address

PARENTAL CONSENT FORM

I give permission for my child _____ to participate in the City of Wells Baseball/Softball program and agree to release any and all persons supervising and assisting in the program from any liability for injuries that my child may sustain while participating in the program. I also understand that I will assume all financial responsibility for any medical expenses that may be required to treat injuries sustained while participating in this activity. In the event that I am unable to be contacted, I hereby give permission to provide emergency first aid and/or medical care for my child.

In case of emergency, please notify _____
(Name) (Phone Number)

Parent's Signature _____