

PALATINE COMMUNITY BASEBALL & SOFTBALL BASEBALL 2026 REGISTRATION FORM

pcbs.fun

Past Participant (PCBS)

New Participant

PLEASE PRINT ALL INFORMATION

Participant's Last Name: _____ First: _____

Address: _____

City/State/Zip: _____

Date of Birth: _____

School/Current Grade: _____

Parent Contact Name: _____

Primary Phone: _____ Cell Phone: _____ Work Phone: _____

E-mail: _____ Remove me from the PPD notifications list

Additional Parent Contact Name: _____ Cell Phone: _____ Email: _____

Participates in other spring sport/activity? Yes Which? _____

Additional family member(s) playing in PCBS? Name: _____ League: _____

Note: each player needs a separate registration form

Please contact me regarding sponsoring a Team Yes No

Parent Participation Choices Head Coach Assistant Coach Parent Volunteer Size Preference _____

ADA Need Accomodations Inclusion services through NWSRA needed for participant? Yes No

PNO			
FOR OFFICE USE ONLY			
CA	CK	CG	ID
OD	FHS	PHS	SCH
Proof of Residency			
ID	OD	HS	Code: _____
Processed by: _____		Date: _____	
Checked by: _____		Date: _____	
Batch # _____			

REGISTRATION INFORMATION

Check off the appropriate league and circle the appropriate fee per division

BASEBALL Current Grade Level for 2025-2026 School Year by 8/31/2025

			EARLY FEE/DATE	FINAL FEE/REGISTRATION DEADLINE
<input type="checkbox"/> 201010-01	T-Ball (Co-ed)	Pre-K (4-5 years)	\$195/February 2	\$225/March 16
<input type="checkbox"/> 201010-02	Rookies (Co-ed)	Kindergarten (5-6 years)	\$195/February 2	\$225/March 16
<input type="checkbox"/> 201010-03	Future Stars	1st Grade (6-7 years)	\$195/February 2	\$225/March 16
<input type="checkbox"/> 201010-04	Pinto	2nd Grade (7-8 years)	\$265 /February 2	\$295/March 6
<input type="checkbox"/> 201010-06	Mustang	3rd-4th Grade (8-10 years)	\$265 /February 2	\$295/March 6
<input type="checkbox"/> 201010-07	Bronco	5th-6th Grade (10-12 years)	\$265 /February 2	\$295/March 6
<input type="checkbox"/> 201010-08	Pony	7th-8th Grade (12-14 years)	\$265 /February 2	\$295/March 6
<input type="checkbox"/> 201010-09	Colt	9th-12th Grade (14-18 years)	\$265 /April 5	\$295/May 3

Additional Child Fee: deduct \$25 per additional child

First Name Last Name (Select one) _____ Number Choice: (pick 2) _____, _____ Hat Size: Youth or Adult

Shirt Size

Youth S (5-7) Youth M (8-10) Youth L (12-14) Youth XL (16-18) Adult S Adult M Adult L Adult XL Adult 2XL
Chest 26-28in Chest 28-30in Chest 30-32in Chest 32-34in Chest 34-36in Chest 38-40in Chest 42-44in Chest 46-48in Chest 50-52in

Pant Size

Youth XS Youth S Youth M Youth L Youth XL Adult S Adult M Adult L Adult XL Adult 2XL Adult 3XL

THIS SECTION MUST BE COMPLETED FOR ALL PARTICIPANTS

PRIVACY POLICY AND PHOTO STATEMENT: Visit palatineparks.org to view the Palatine Park District Privacy Policy and Photo Statement.

RELEASE AND HOLD HARMLESS WAIVER

IMPORTANT: The Palatine Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Palatine Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs. You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or has recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity. **WARNING OF RISK:** Recreational activities are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity. All hazards and dangers cannot be foreseen. Depending on the particular activity, certain risks, dangers and injuries may exist due to inclement weather, slips and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and other risks inherent to the particular activity. In this regard, it is impossible for the Palatine Park District to guarantee absolute safety. **WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK:** Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services and vehicle operations, when provided). I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Palatine Park District, including its officials, agents, volunteers and employees. **I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature. PARTICIPATION WILL BE DENIED If the signature of adult participant or parent/guardian and date are not on this waiver.**

Signature: _____ Relationship to Participant: _____

Emergency Name: _____ Emergency Phone: _____

Please indicate if there is any medical information (asthma, diabetes, etc.) or food allergies that staff should be aware of: _____