

2025 FALL BASEBALL / SOFTBALL REGISTRATION



REGISTRATION IS OPEN AUGUST 11-25, 2025

Questions? Call: (803) 924-8328 or Email: recreation@newberrycounty.gov

Register On-line at NewberryCountyBaseballSoftball.com

****Once uniforms are ordered there will be NO refunds.***

Siblings will be placed on a team together if they fall within the same age group unless we are notified otherwise.

*****NO OTHER REQUESTS FOR A SPECIFIC TEAM/COACH SHOULD BE MADE.*****

Practices prepare players for games; therefore, practice attendance will impact playing time.

DEADLINE: AUGUST 22, 2025

REGISTRATION FEE: \$35

Ages are based on the players age on 12-31-25

☐ Softball – 8U (girls only; age 7-8)

☐ Softball – 10U (girls only; age 9-10)

Ages are based on the players age on or before 4-30-26

☐ Baseball – 8U (co-ed; age 7-8)

☐ Baseball – 10U (co-ed; age 9-10)

NOTE: Jersey is provided.

EVALUATION: A player evaluation MAY be conducted depending on the number of players registered.

PARTICIPANT & PARENT/GUARDIAN INFORMATION

Player's Full Legal Name: _____

(As it appears on birth certificate) First Name _____ Middle Name _____ Last Name _____

Gender: M F Age: ____ DOB: ____/____/____ School Attending: _____
(Use above cutoffs)

Address: _____ City: _____ Zip: _____

Did you play last year? YES NO If so, what team (name/age)? _____

PLAYER'S JERSEY SIZE

Select only one.

☐ Youth Small (6-8)

☐ Youth Medium (10-12)

☐ Youth Large (14-16)

☐ Adult Small

☐ Adult Medium

Check primary contact(s). This will be the first point of contact for staff and coaches.

☐ Mother/Guardian Name: _____ Phone #: _____

☐ Father/Guardian Name: _____ Phone #: _____

E-mail(s): _____

Emergency Contact: _____ Relationship: _____ Phone: _____

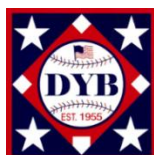
VOLUNTEER OPPORTUNITIES

Please **Circle:** I would like to VOLUNTEER as a: **COACH** **ASSISTANT COACH**

Name: _____ Division: _____ Phone #: _____

**Individuals selected to serve as a head coach MUST attend a coaches meeting.*

SEE SECOND PAGE; SIGNATURE REQUIRED



PRACTICES:

Mondays & Wednesdays - 8U at 5:30 PM & 10U at 6:45 PM - Prosperity (Langford St) or Newberry (JD Rook)

GAMES:

WEDNESDAYS - 8U at 5:40 PM followed by 10U at 6:45 - Prosperity (Langford St) or Newberry (JD Rook)

Games are scheduled for Wednesdays so that staff are available as needed. This is the day of the week that soccer does not have games. Games will begin Sept. 17 and end by Nov. 12 (6 to 8 game season).

INSTRUCTIONAL - Coaches will work with all players in as many different positions as possible and within the players' comfort/ability level. Games will be more of a scrimmage style with the umpires stopping as needed to allow for instructional moments. This league is to prepare players for the main spring season.

All details contained herein are dependent on the number of registrations received for each division and are subject to change.

READ CAREFULLY BEFORE SIGNING: ASSUMPTION OF RISK & WAIVER OF LIABILITY

The County of Newberry Recreation Department ("COUNTY"), the Town of Prosperity ("TOWN"), the City of Newberry Parks, Recreation, & Tourism Department ("CITY"), the Newberry County Family YMCA ("YMCA"), and Newberry College ("COLLEGE") who are referred to collectively herein as ("PARTIES").

In signing up and participating in PARTIES programs, I expressly assume the risk and legal liability and waive and release all claims for injuries, damages or loss which my child(ren) or myself might sustain as a result of participating in any and all activities, including transportation services, where provided.

I acknowledge that there are certain risks of physical injury to participants in these programs and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I/my child(ren) may sustain as a result of participation. I further agree to waive and relinquish all claims I/my child(ren) may have as a result of participating in these programs against the PARTIES, their officials, agents, volunteers, sponsors, and employees.

If my child is injured, becomes ill, or needs medical attention for any reason, I authorize program staff to assist my child and to call for medical assistance. My child will be transported to the nearest medical facility as determined by emergency personnel. I understand I am responsible for all costs incurred in any such medical emergency.

I understand photographs of my/my child's participation in this program may be used by the PARTIES to promote the PARTIES' events and/or facilities, without compensation and without additional approval.

The PARTIES have created new protocols and put in place preventative measures to reduce the spread of covid-19; however, the PARTIES cannot guarantee that you or your child(ren) will not become infected with covid-19. Further, attending any program may increase your child(ren)s risk of contracting covid-19. I assume the risk that myself/my child may be exposed to or infected by COVID-19 by attending the PARTIES programs, and that such exposure or infection may result in personal injury, illness or other result.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself including, but not limited to, personal injury, disability, and death, illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)s attendance at the PARTIES programs. On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold the PARTIES, past and present Council members, PARTIES employees, agents, and representatives, of and from the claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of the PARTIES, their employees, agents, and representatives.

I HAVE READ AND FULLY UNDERSTAND THIS WAIVER AND RELEASE.

Print Name of Parent/Legal Guardian (if participant is under age 18)

Signature of Participant or Parent/Legal Guardian (Parent or Legal Guardian must sign for participants under age 18)

Date

For more information: Call: (803) 924-8328 or Email: recreation@newberrycounty.gov

For Office Use Only: Date Registered: ____ / ____ / ____ Amount paid: \$ _____ Registered by: _____