Montville Township Recreation Department's



T-BALL LEAGUE

Summer 2019



WHO: Children who are **ENTERING** Kindergarten in September 2019.

WHAT: This is an opportunity for children to LEARN the fundamentals of softball in a "fun" recreational setting.

The teaching of skills/drills will be emphasized. Children will be placed on teams supervised by

volunteer coaches.

WHERE: Township Parks and School Ballfields. (Muni Fields, Etta Konner, Reilly Field and Manchester Park)

WHEN: The first two weeks will be team practices followed by 4 weeks of games.

Teams will meet on Tuesdays (*Rain dates on Wednesdays*): July 9, 16, 23, 30 & August 6 & 13 from 6:15pm to 7:30pm - 6 weeks

FEE: \$55.00 per child. (\$10.00 discount for additional siblings.)

NOTE: There will be a \$20.00 processing fee for program refunds PRIOR to program start!

LATE FEE: AS of June 24th the registration fee is: \$65.00 per child with NO GUARANTEE of team placement.

PAYABLE TO: Montville Recreation (Our office is located at 195 Change Bridge Road in Montville 07045.)

WE ARE GOING GREEN! NO FORMS NECESSARY!

To avoid convenience fees pay by Check or Cash at the Recreation Office Kiosk!

REGISTRATION PROCEDURE:

1. In Person 2. On-Line 3. Mail **OR** 4. Payment Drop Box in Municipal Building's Parking Lot Cash, Checks or Credit Cards for In-Person Registration **OR** Checks Only for Mail or Payment Drop Box

OR Credit Cards for On-Line Registration from Home! Coming Soon...E-Checks from home with a .75% convenience fee!

Please Note: You will be charged a 3 % convenience fee for credit card use!

For On-Line Registration !!! Go to the town's website at: http://www.montvillenj.org/RecRegistration
To Download Registration Forms go to: http://www.montvillenj.org/RecFlyers



LIKE US on FACEBOOK at: https://www.facebook.com/Montvillerec/



PARENTS! REGARDING TEAM PLACEMENT:

We cannot guarantee your child will be placed with his/her friends and there is no guarantee your child will be on a team with all kids from their elementary school.

Volunteer Coaches select their team players. Teams are made up of boys AND girls and first organized by where our volunteer coaches live in combination with where the kids will go to school. How many kids register from each school plays a key role in putting teams together and can sometimes necessitate mixing schools. If this occurs, we make every effort to ensure there are a few kids from the same school on each team wherever possible.

You will be contacted by your coaches the last week in June.

VOLUNTEER COACHES NEEDED!!

If you are interested in coaching OR assisting a team, you are required to complete a coach's application, attend a training class, and complete a background check to secure a Montville Township coach's photo I.D. You may pick up the coaches application at the Recreation Department or download on the website. YOU MUST RSVP to attend a coach training class date. Email ldent@montville.nj.org or call 973-331-3305.

CERTIFICATION TRAINING CLASS DATES for COACHES:

Tuesdays: 6/4 & 6/18 or 7/16 from 6:30pm to 9:30pm at the Community Park Field House located at 130 Change Bridge Road in Montville.

TEAM PLACEMENT MEETING for COACHES:

Wednesday, June 26th at the Community Park's Field House at 6:30pm for COACHES to select their teams.

Coaches will receive a confirmation regarding this meeting.

DO NOT BRING CHILDREN to the meeting – THANK YOU!

QUESTIONS ????

Call Recreation: 973-331-3305 OR visit our website at: www.montvillenj.org

Montville Township Recreation Department's

T-BALL LEAGUE APPLICATION Summer 2019

\$55.00 Fee until June 21, 2019
AS of June 24, the cost is \$65.00 pp with no guarantee of team placement.

PLEASE PRINT CLEARLY

Child's Name	School	Sept '19 Grade _	D/O/B	Age	M/F
Email/s (Please distinguish b/w le	tters & numbers)				
Address	Town		Phone		
1. Parent/Guardian # 1	Relatio	n	Phone #		
2. Parent/Guardian # 2	Relation	1	Phone #		
PLEASE CIRCLE JERSEY SIZ	E: YOUTH: S (6-8) M (10-12)			
Emergency Contact Information (IF the above contacts cannot be	reached):			
1. Name	Relation	Pho	ne Number		
2. Name	Relation	Pho	ne Number		
Please list any special needs that your	child may have that will assist us in	providing your c	hild with a success	ful experience	: :
Please describe any medical or hea	alth problems your child may hav	ve:			
Please list any medication to be ta	ken in certain emergencies:				
	and Once completed coaches receive VLEMENT WILL BE CONFIRME	e an ID badge i ED by an email	to be worn at all from the Recrea	times when tion Departi	coaching.
•	<u>would like to apply to</u> : C				
NAME					
VOLUNTEER EMAIL ADDRESS_					
	*** ld has my permission to par ntville Recreation Departm			dent insur	ance.
Parent/Guardian Signature				Date	
<u>FOR OFFICE USE (6/3/19):</u>	Fee Paid Cash Check	Received By _	Date	<u>PROGRAM</u>	# 8 37