



2024 Viking Center **Softball/Baseball Program**

We will have teams for the following grades:

- K-1st grade Softball
 - 1st-2nd grade (8U) Baseball
 - 2nd-3rd grade Softball
 - 3rd-4th grade (10U) Baseball
 - 4th-5th grade Softball
 - 5th-6th Grade (12U) Baseball
 - 6th-8th grade Softball
 - 7th-8th grade (14U) Baseball
- (Subject to change based on number of participants)

Registration fee for the program:

Viking Center Family Memberships:	Free
Non-Members/Memberships not including children	\$30

****Uniform order sheets are separate****

Please fill out the **Registration and Consent** form on the back of this sheet. Forms can be returned to the Viking Center or the Stanton Elementary Office. Registration and payment is **due NO LATER than Monday March 11th, 2024**. All checks made payable to: Stanton Viking Center, 501 Elliott St, PO Box 42, Stanton IA 51573.

If you have any questions, please contact the Viking Center at: 712-829-2900 or email: vikingcenter@myfmtc.com.

****Please fill out registration form and consent form on back side**
Viking Center Competitive Softball/Baseball
2024 Participation Consent Form

(Please Print Information)

Player's Name: _____

Address: _____

Age: _____ Current Grade in School: _____ Softball / Baseball (circle one)

Parent/Guardian Name: _____

Home Phone #: _____ Work/Cell #: _____

Email: _____

I, _____ would be interested in helping with **umpiring/coaching**
(please circle one if interested) this summer.

Registration Fee:

Viking Center Family Memberships: **FREE**

Non-Members (Memberships not including children): **\$30**

Check payable to: **Stanton Viking Center**

Consent Form & Registration Fee Due by Monday, March 11th, 2024.

We, the undersigned, being parent and/or guardians of:

does hereby have our permission to participate in the Viking Center Softball/Baseball Program. We do hereby agree to provide our own medical insurance to cover injuries to said child, which may be caused or incurred during participation in said program. We hereby agree to hold harmless and relieve the Viking Center Softball/Baseball Program and Coaches from any liability in connection with any injuries received by the child during their participation in the program. This waiver of medical insurance and release of liability is signed after we have fully read the same and understand it. We hereby consent to the child's participation.

Parent and/or Guardian Signature

Date