

# 2026 Rookie Baseball

## Ages 3 - 5



**Program Goals:** Get out and play! Have fun while developing motor skills, self – esteem and basic baseball skills!

**Requirements:** This is a family oriented program requiring all children registered to have a parent or guardian present to participate with the child. A glove is required; all other equipment is optional as the parks department will provide it.

### Session Dates and Times:

Session A1	Mon & Wed	5:30 - 6:15 pm	Sat	9:00 - 9:45 am	June 8 - 20
Sessions A2	Mon & Wed	6:30 - 7:15 pm	Sat	10:00 - 10:45 am	June 8 - 20
Session B1	Tues & Thurs	5:30 - 6:15 pm	Sat	11:00 - 11:45 am	June 9 - 20
Session B2	Tues & Thurs	6:30 - 7:15pm	Sat	12:00 - 12:45 pm	June 9 - 20
Session C1	Mon & Wed	5:30 - 6:15 pm	Sat	9:00 - 9:45 am	July 6- 18
Session C2	Mon & Wed	6:30 - 7:15 pm	Sat	10:00 - 10:45 am	July 6 - 18

**Location:** Field 3 at Godfrey Ball Park unless otherwise noted.

	Early Registration	Regular Registration
	March 1 - March 31	April 1 - April 30
<b>Resident</b>	\$30	\$35
<b>Non-Resident</b>	\$40	\$45

Late registration available for an additional fee

Please remit payment to the Godfrey Parks and Recreation Department located at 6810 Godfrey Road, P.O. Box 5067, Godfrey, IL 62035. Registrations can be mailed in or dropped off at the office Monday-Friday, 7:30 am - 12 pm; 1 pm - 4:30 pm.

\*Online registration available at [www.teamsideline.com/godfrey](http://www.teamsideline.com/godfrey)\*



**GODFREY**  
PARKS AND RECREATION

For additional information, please call us at 466-1483, visit us online at [www.godfreyil.org](http://www.godfreyil.org), or follow us on Facebook at Village of Godfrey Parks and Recreation Department

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Session: A1 A2 B1 B2 C1 C2

Name: \_\_\_\_\_ Male/Female Birthdate: \_\_\_\_\_

Age: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone Number \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Office Use Only:

Date paid: \_\_\_\_\_

Amount Paid \_\_\_\_\_

Form of payment: \_\_\_\_\_

Receipt # \_\_\_\_\_

T-shirt Size

YXS \_\_\_ YS \_\_\_ YM \_\_\_ YL \_\_\_

AS \_\_\_ AM \_\_\_ AL \_\_\_ AXL \_\_\_



\*\*\*I, the undersigned parent or legal guardian of the above named child, do hereby consent that he/she may participate in the 2026 Rookie Baseball Program. It is agreed that the named organization or employees assume no legal liability for injuries or other loss as a result of participation. Godfrey Parks and Recreation reserves the right to use any pictures for publication. We welcome individuals of all abilities to enjoy our facilities and programs. If you or someone you know requires assistance, let us know at the time of registration or at least 2 weeks before participation. For more information, contact the Parks and Recreation Department at 618-466-1483.

PRINT NAME OF PARENT/GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_