

Language Of Baseball LLC. – NORTH TEXAS BASEBALL 14u and/or 15u Teams – Fall 2025

This agreement is held between (name of parent/guardian)\_\_\_\_\_

And player\_\_\_\_\_ and the Language of Baseball LLC, dated: \_\_\_\_\_

I certify that my child is in excellent health and may participate in strenuous physical activities, including baseball. I certify that there is no limits to my child’s participation except as stated in writing and include with this agreement. I hereby authorize members of the Language Of Baseball LLC. to act as my agent to secure emergency medical treatment for my child, when in the opinion of the staff’s representatives such emergency treatment is deemed appropriate during the time my child is in attendance during events. I hereby agree to hold the Language Of Baseball LLC. and its representatives harmless for exercising their judgment in authorizing such emergency medical treatment. I agree the Language Of Baseball LLC. will cover general and accident insurance that will be activated only after the players primary insurance is used.

(State the name of primary insurance carrier \_\_\_\_\_).

I agree to pay a **one-time payment of \$1,725 now or, three payments of \$600 before August 1, 2025.**

Payments are made to: **Language Of Baseball LLC.**

I understand that this fee collected is not refundable or transferable for any reason.

It is agreed that Language Of Baseball LLC will enroll (name of player) \_\_\_\_\_  
for the 14u and/or 15u FALL 2025 Season.

**NORTH TEXAS BASEBALL 14U and/or 15u FALL SEASON INCLUDES:**

Fees for team practices and team games, umpire fees, field fees, insurance, coaching fees, game jerseys, practice jerseys, game caps. Our team will participate in the FIVE TOOL 14U and/or Fall League 2025 and various team practices.

\* Failure to follow team rules may lead to removal from team roster.

Signature / Parent/Guardian: \_\_\_\_\_

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

Language Of Baseball LLC.

Officer:\_\_\_\_\_ Date:\_\_\_\_\_

Make / Mail Check To:

**LANGUAGE OF BASEBALL LLC**

**1615 County Road 1106**

**Anna, TX 75409**

**PLEASE WRITE CLEARLY... This info will go on our 'scout sheet'.**

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Parents Cell Phone \_\_\_\_\_

Players Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Mom/Dad/ Siblings Names \_\_\_\_\_

Player's Date of Birth \_\_\_\_\_ Player's HT \_\_\_\_ Player's WT \_\_\_\_ GPA \_\_\_\_

SAT \_\_\_\_\_

Player's (3) favorite uniform number choices – list – top choices first \_\_\_\_\_

Player's Jersey Size? \_\_\_\_\_

List player's two best positions \_\_\_\_\_

Along with being prepared in the classroom, baseball field, players are encouraged to prepare their hearts to hear and listen to God's calling for their lives. This is best accomplished by the DAILY READING OF THE BIBLE. All players encouraged to commit to the DAILY reading of God's Word in the HOLY BIBLE.

ADDITIONAL PLAYER RULES –

- Listen to the Coach.
- Respect Your Teammates.
- No Throwing Equipment. Will lead to REMOVAL FROM GAME !
- Be On Time to Games and Practices.
- Know the PLAYBOOK!
- No Jewelry or Cell Phones, Allowed during practices or games,
- No wearing Hats / Caps inside – example - hotel eating areas, or restaurants.

By signing below – you agreed to and have read the contents of the agreement and understand the level of commitment both I and my teammates agree to.

Player's Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_

Thank you, I am looking forward to being your Coach and Mentor !

~Coach Dave Kirilloff