

# CASCADE LITTLE LEAGUE 2010 REGISTRATION

For League Use Only			
Birth Certificate	Yes <input type="checkbox"/>		No <input type="checkbox"/>
Clinic Registration	Yes <input type="checkbox"/>		No <input type="checkbox"/>
Concession Opt-out	Yes <input type="checkbox"/>		No <input type="checkbox"/>
Participation Fees		I <input type="checkbox"/>	F <input type="checkbox"/>
			S <input type="checkbox"/>
Cash <input type="checkbox"/>	Check <input type="checkbox"/>	AMOUNT \$	_____

**TO REGISTER:**

1. Complete this form with two required signatures. (front and back)
2. Bring this registration form with a check or money order to registration
3. Registration must be received by **February 27<sup>th</sup>** to guarantee a spot with no late fee.
4. Teams will be formed on February 28th. Players can only be added after this date if space is available.
5. All Levels of play will register and begin play at the same time. Juniors no longer begin later than other levels of play.

**Registration due by February 27<sup>th</sup>, after this date a \$10 late fee is charged.**

Select ✓	League Age	Division	Other Information	Registration Fees and Required Participation
	5-7 (Boys)	T-ball		<b>PLEASE SELECT PAYMENT OPTION BELOW:</b> <b>1. <input type="checkbox"/> \$50.00</b> and a minimum of 2 shifts assisting in concessions.  <b>2. <input type="checkbox"/> \$50.00 Registration + \$45.00 Concession Opt-out</b>
	6-7 (Girls)	T-ball		
	7-10 (Boys)	AA Minors	1 yr T-ball required	
	7-10 (Girls)	AA Minors	1 yr T-ball required	
	8-11(Boys)	AAA Minors BB	8 – 10 yr olds must tryout	
	8-10 (Girls)	AAA Minors SB	8 – 10 yr olds must tryout	
	9-12 (Boys)	Majors BB	11 & 12 yr olds must tryout for Majors	
	9-12 (Girls)	Majors SB	11 & 12 yr olds must tryout for Majors	
	13 – 14	Juniors BB & SB		
	14 - 16	Seniors BB & SB		
				\$60.00 + 2 shifts in concessions (if opting out of concessions add \$45.00)
				\$60.00 + 2 shifts in concessions (if opting out of concessions add \$45.00)

**NOTE:** Baseball League age is the player's age as of April 30th.  
Softball League age is the player's age as of December 31<sup>st</sup>.

Player's Last/First Name	_____ / _____	Gender (M or F)	_____
PO Box #	_____	Birthdate Mo/Da/Yr	____ / ____ / ____
Street Address	_____	Does child live in Cascade S.D. boundaries?	Y N
City & Zip Code	_____	School currently attending	_____
Home Phone #	( ) _____	Did child participate in CLL in 2009?	Y N
Player e-mail address	_____	If yes, which team?	_____

**Parent #1**

**Parent #2**

Last/First Name	_____ / _____
Ph#/Cell/Wk/Hm	_____
E-mail address	_____
Occupation	_____

Last/First Name	_____ / _____
Ph#/Cell/Wk/Hm	_____
E-mail address	_____
Occupation	_____

Special Requests  
(CLL cannot guarantee requests)

## Parental Agreement for Participation (ALSO COMPLETE MEDICAL RELEASE ON REVERSE)

1. I/We, the parents/guardians of the above-named player approve of their participation in any and all Little League activities, including transportation to and from these activities.
2. I/We know that participation in baseball or softball may result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold harmless Cascade Little League, Little League Baseball, Inc., the organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities for any claim arising out of any injury to my/our child whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident and liability insurance.
3. I/We agree to return, upon request, the uniform and other equipment issued to my/our child in as good a condition as when received except for normal wear and tear.
4. I/We agree that the above named player may be included in photographs and audio/video highlights which may be used in promotion of Cascade Little League and posted on its web site unless a written request to the contrary is received and approved.
5. Unless payment option #2 above is marked, I agree to assist with the concession stand 2 times (for each registered child) during the season and understand that the concession proceeds help keep our costs low.

Signature of Parent or Legal Guardian \_\_\_\_\_

**VOLUNTEER SUPPORT**

Cascade Little League is a volunteer organization. Your participation is critical for the continued success of the programs. Please indicate below where you can invest your time, energy, and talent to make this season the best one ever.

- |                                  |                                      |                                       |   |                                       |
|----------------------------------|--------------------------------------|---------------------------------------|---|---------------------------------------|
| Manager <input type="checkbox"/> | Concessions <input type="checkbox"/> | Construction <input type="checkbox"/> | Fields/Maintenance <input type="checkbox"/> | Board Member <input type="checkbox"/> |
| Coach <input type="checkbox"/>   | Team Mom <input type="checkbox"/>    | Umpire <input type="checkbox"/>       | Fund Raiser <input type="checkbox"/>        | Website Help <input type="checkbox"/> |

**Cascade Little League**

