



VILLAGE OF CUYAHOGA HEIGHTS SPORTS DEPARTMENT
 4863 East 71st Street • Cuyahoga Heights • OH • 44125

SUMMER BASEBALL and SOFTBALL REGISTRATION

**All players need to be registered*

Registration Deadline: March 15-(\$25 LATE FEE APPLIES)

REGISTRATION FOR CUYAHOGA HEIGHTS VILLAGE RESIDENTS ONLY

<p>BOYS - (Circle one) T-Ball (4-6 years old) Coach Pitch (7-8 years old) Minors (9-10 years old) Majors (11-12 years old) Pony (13-15 years old) *Travel (15-16 years old) - <i>*Team is not financially supported by the Village</i></p>	<p>GIRLS - (Circle one) T-Ball (4-6 years old) Coach Pitch (7-9 years old) Minitail (10-11 years old) Pigtail (12-14 years old) *Travel (15-18 years old) - <i>*Team is not financially supported by the Village</i></p>
---	--

Name: _____ Date of Birth: _____
 Address: _____ Phone: _____
 Parent/Guardian E-mail Address(es): _____

If our Village is unable to form a team, please list your preferred village/team (i.e., Valley View – Coach Smith, Brooklyn Heights – Coach Smith): _____. **Please note that teams are filled based on roster needs and guidelines. Therefore, your preferred request will be considered, but is not guaranteed.*

Please list any conflicts your child may have during the season (i.e. another activity on Mondays, etc):

Pants, Shorts, and Shirt Sizes

Youth Small	(6-8)	Pants/Shorts: _____	Shirt: _____
Youth Medium	(10-12)		
Youth Large	(14)		
Adult Small	(34-36)		
Adult Medium	(38-40)		
Adult Large	(42-44)		

Does child have any physical ailments, such as allergies, heart, etc.? _____
 If yes, please explain: _____

Having been informed of the organization of the Cuyahoga Heights Sports Department to provide supervised youth baseball/softball, I/We the parents/guardians of the above named candidate, do hereby give my/our approval of his/her participation in any and all of the activities during the current season. I/We do assume all the risks and hazards incidental to the conduct of the activities, transportation to and from the activities, and I/We do further hereby release, absolve, indemnify and hold harmless the Village of Cuyahoga Heights, the organizers, sponsors, leasers and the supervisors appointed by them. I/We likewise release from responsibility any person transporting my/our child to or from activities. The Village of Cuyahoga Heights does not provide medical insurance. Do you have hospitalization and/or medical insurance? YES or NO. I have read and understand the above waiver and release:

 Parent/Guardian Date

 Parent/Guardian Date

VOLUNTEER COACH REGISTRATION:
 NAME _____ Head Coach Assistant