



SUBURBAN ATHLETICS, INC.
2010 Boys & Girls Baseball/Softball Registration Form
WWW.SUBURBANATHLETICS.COM

- Please fill in BOTH SIDES of the Registration Form completely. One Form per child (see the Web Site for additional forms)
- Payment must be received in FULL when registering (either in person or by mail)(the sooner the better)
- For registration questions and/or financial assistance please call: **Karan Tesch @450-3503**
- Registration Options...

EITHER in person at: **Spring Road School, Neenah (10:00 am-1:00 pm)**
Saturday, January 16, 2010 and February 20, 2010

OR by mail to:
Suburban Athletics, Inc.
P.O. Box 42
Neenah, WI 54957-0042

- Check each league below for the applicable fees and deadline dates.
- Please include an additional **\$20** for forms sent in after the posted deadline date
- All levels filled on a 1st come basis and deadlines need to be strictly followed.... **NO REFUNDS**

Players Name: _____ **BIRTH Date:** _____ **Age:** _____

(As of April 30, 2010)

Address: _____

**tee-Ball - can be EITHER entering Kindergarten for the
2010/2011 school year OR the age of 5 by April 30, 2010**

City/Zip: _____ **Parents e-Mail:** _____

Phone: _____ **Cell Phone:** _____ **School:** _____

Grade: ____ **Sex:** ____ **Team Name Last Year (if applicable):** _____
(Completed in June, 2010)

SHIRT SIZE (Check one) **YOUTH SIZES:** **Small (6-8)** **Medium (10-12)** **Large (14-16)**
ADULT SIZES: **Small** **Medium** **Large** **Extra Large**

Must answer

Is your boy or girl also interested in playing on a competitive weekend tournament team? **Yes** **No**
(See the Web Site and/or Calendar for tournament team tryout dates, locations, and times)

GIRLS GRADES 3rd - 8th Did you pitch in the last couple of years? **Yes** **No**

Would you be interest in a Pitching clinic early March or April? **Yes** **No** (check website for updates)

Volunteer Opportunities

Suburban Athletics, Inc. is a 100% volunteer run organization. In addition to registration fees and fundraising opportunities the league also relies on parent participation to help organize and support the program. Please mark at least one volunteer position. We are 501(c) (3) approved. Please check with your Human Resources Department about donation/sponsorship opportunities.

Where can we count on your help? (Check at least one or call a Board Member if you have other ideas).

- Team Parent** **Field Clean-up/Prep** **Board Member** **Concession (Tournaments)**
(Pre/Post Season)
- Head Coach** **Assistant Coach** **Tournament Coach** **Sponsor a Team (Team Name and child's name/level)**

BACKGROUND CHECKS ARE DONE ON EVERYONE VOLUNTEERING TO BE A COACH OR ASSISTANT COACH PLEASE PROVIDE US WITH YOUR:

Legal First Name: _____ **Legal Middle Name:** _____ **Phone #** _____

Full Last Name: _____ **Birth Date:** _____ **Shirt Size:** _____

FOR SRI Use Only: Date: _____ **Cash:** _____ **Check#:** _____ **\$** _____

League Choice/Fee (Check one)

MARCH 1st REGISTRATION DEADLINE

SOFTBALL:

- Girls Grades 3rd & 4th (\$50)
- Girls Grades 5th & 6th (\$50)
- Girls Grades 7th & 8th (\$50)

Baseball:

- Boys Ages 9-10 (\$50)
- Boys Ages 11-12 (\$50)
- Boys 13 & up:
www.neenahbaseballathletics.com

Boys Age 9-12 and Girls Grades 3-6 that are either new to Suburban Athletics, Inc., or are moving to a new level, must attend Evaluation Day on March 27th, 2009. All Girls Grades 7-8 will be re-evaluated this year. (Refer to the Web Site and/or Calendar for time & location details)

APRIL 5th REGISTRATION DEADLINE

- Tee Ball Baseball (Boys & Girls) Ages 5-6 (\$40)
 - Coach Pitch Baseball (Boys & Girls) Ages 7-8 (\$40)
- Do you have a SIBLING in T-BALL/COACH PITCH? Yes _____ NO _____ If yes, name _____

Tee Ball and Coach Pitch players do not need to attend Evaluation Day. Refer to the Web Site and/or Calendar for opening day information. Players will be contacted by the team coach prior to opening day for additional information.

APRIL 16th REGISTRATION DEADLINE

- Freshmen Girls Softball Ages 16 & Under (\$85)
- Varsity Girls Softball Ages 18 & Under (\$85)

AUTHORITY TO SECURE MEDICAL ASSISTANCE / MEDICAL & PERSONAL INJURY WAIVER

We (I) the parents or legal guardian(s) of: _____ (Name of Registered Player)

Hereafter designated as "my child", acknowledge that Suburban Athletics, Inc. of Neenah, WI, does not provide accident/medical insurance to cover participants in its athletics program and related activities. We (I) the undersigned have our (my) own accident/medical insurance and are (am) willing to take full financial responsibility for any and all injuries sustained by "my child" while participating in any practice session, actual athletic competition, or any other related supporting activities of the Suburban Athletics, Inc. program.

Accident/medical insurance carrier is: _____ my policy number is: _____

We (I) further knowingly and voluntarily waive any and all claims against, and forever release Suburban Athletics, Inc., Neenah, WI, its board members, officers, agents, team managers, and coaches for any and all injuries or consequences of injuries sustained by "my child" while participating in any practice session, actual athletic competition, or any other related supporting activities of the Suburban Athletics, Inc. program.

We (I) also knowingly and voluntarily waive any and all claims against, and forever release the Park Commission, and the Towns of Neenah, Menasha, and Clayton, and its employees, officers and commissioners for any and all injuries or consequences of injuries sustained by "my child" while participating in any practice session, actual athletic competition, or any other related supporting activities of the Suburban Athletics, Inc. program.

Our (my) signature below will allow a manager, coach, or other agent of Suburban Athletics, Inc., Neenah, WI, to admit "my child" to a medical facility and/or seek the care of a physician if conditions warrant such action, and we (I) understand that charges for such medical treatment and/or related expenses will be my responsibility.

Sign: _____ Print Name: _____ Date: _____
(Father or Legal Guardian)

(Father's Address - if different than front of Registration Form) (Phone) (Cell Phone)

Sign: _____ Print Name: _____ Date: _____
(Mother or Legal Guardian)

(Mother's Address - if different than front of Registration Form) (Phone) (Cell Phone)