Dresden Cal Ripken League
Registration Form

_____ _____ ____/____/_____
Player's Name AGE Date of Birth
(As of May 1st, 2010)

_____ _____
2009 Team (if played) Shirt Size (also specify adult/youth)

Would you be interested in coaching a team: Yes No
* All coaches/assistant coaches must be certified according to Cal Ripken Baseball.

____ Coach Pitch (7-8) ____ Cal Majors (9-10) ____Cal Majors (11-12)

Age cut-off is on or before April 30th

***The cost of Cal Ripken Baseball is $40 per player. Please make checks payable to Dresden Cal Ripken League.

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_____ _____ _____
Parent/Guardian Name (please print) Phone Alternate Phone

_____

_____
Address

Dresden Cal Ripken Baseball is covered under accidental and liability insurance. In signing this document you are agreeing to allow your child to practice, play, and travel when necessary covered under the league insurance plan. Likewise, you agree to follow the decisions of the Dresden Cal Ripken League Board of Directors in regards to all league policies and procedures.

_____ _____
Parent/Guardian Signature Date