

ROCKPORT PONY LEAGUE

"Protect Our Nations Youth" SUMMER LEAGUE

PeeWee & Shetland \$35 • Pinto \$45 • Mustang \$55.00
Return checks are subject to a \$10.00 processing fee.

For additional player in family we have a Sibling Discount of \$10.00 per sibling
Players must play in their age division.

The registration age is determined by the age of the player on April 30, 2008.

Division: PeeWee (3-4) Shetland (5-6) Pinto 7-8 Mustang 9-10

Player Information:

First Name _____ Last Name _____

Birthdate (Mo/Dy/Yr) _____ Grade _____

Previous League _____ Previous Team _____

Player Shirt Size:

(CIRCLE ONE - Choose carefully, shirt ordered is the shirt the player will receive!!)

Youth Sizes - XS S M L XL Initials _____

By initialing here I acknowledge that I have ordered the correct size and will not be able to exchange it

Parent / Guardian Contact Information

Mother/Father/Guardian: Home Phone: _____

Physical Address: Cell Phone: _____

Send me schedules and league information by email Work Phone: _____

To Whom does Player live with the majority of the time: Father / Mother / Guardian (Relationship: _____)

Could you Manage or Coach a PONY League Team? YES ___ NO ___ If yes, what division: _____

Would you or your Company like to SPONSOR a Costal Bend PONY Baseball Team (\$300)? YES ___ NO ___

Would you to help the league as a board member or volunteer YES ___ NO ___

Parent / Guardian Signature: _____ Date: _____

MEDICAL RELEASE

To Whom It May Concern:

This is to certify that I, parent or guardian of _____ a player on the _____ team hereby grant permission to the adult head coach, coach, and business manager of the team to obtain medical care from any licensed physician, hospital or medical clinic, for the player named herein at such time as either parent or legal guardian cannot be contacted in person or by telephone. This authorization shall include all league activities, including the period required to travel to and from those activities. We do hereby waive, release, absolve, indemnify, and agree to hold harmless the local PONY Baseball, Inc. organization, PONY Baseball, Inc.; the organizers, supervisors, participants, and persons transporting the players to and from those activities, for any claim arising out of an injury to the player.

Signature _____ Relationship to player _____

League provides the following for your child:

- Insurance
- Fall League shirt
- Batting helmets
- Baseball bats
- 10+ games

Awards and much more!

"We are committed to teaching your child the game of baseball"
Augie Garcia - Founder

Registration

Sat. Jan. 5th 10-2 @ Wal-Mart
Tues. Jan 8th 5:30-7:30 @ Live Oak Ele.
Sat. Jan. 12th 10-2 @ Wal-Mart
Sat. Jan. 19th 10-2 @ Wal-Mart
Sat. Jan. 26th 10-2 @ Wal-Mart

Coaches Meeting

Mon. Jan. 7th at Old Rockport Elementary

Tryouts

Sat. Feb. 2nd -12 noon @ Tiger Field

Draft

Mon. Feb. 4th 6 p.m. @ Tiger Field

Opening Day - March 29th

Closing Ceremonies - May 17th

Refund Policy:

Full refund will be given up to the Draft date of the player / division. 1/2 refund will be given up to the First Official PONY League Game. "NO" refund will be given after the First Official PONY League Game has been played.

For League Use Only:

Notes: _____ Sibling _____ Regis. Fee _____
_____ Sibling: _____
_____ Ret Player: Yes No Misc. _____
_____ Birth Certificate: Yes No
_____ Total: _____