

CLIFTON AMERICAN LEAGUE

BASEBALL, SOFTBALL & T-BALL

2010 SEASON IS HERE!!!

Boys, ages 5 through 12

Girls, ages 5 through 15

REGISTRATION DATES

Sperling Field House, Speer Avenue

Sat. Jan. 9 9:00 – 12:00 p.m.

Sat. Jan. 16 9:00 - 12:00 p.m.

Fri. Jan. 22 6:30 – 8:00 p.m.

Sat. Jan. 23 9:00 – 12:00 p.m.

Fri. Jan. 29 6:30 – 8:00 p.m.

Sat. Jan. 30 9:00 – 12:00 p.m.

Fri. Feb. 5 6:30 – 8:00 p.m.

Sat. Feb. 6 9:00 – 12:00 p.m.

Fri. Feb. 26 6:30 – 8:00 p.m.

School #12 Gym, 165 Clifton Avenue

Fri. Jan. 8 6:30 – 8:00 p.m.

Fri. Jan. 15 6:30 – 8:00 p.m.

Mt. Prospect Field House, Harrington Road

Sat. Feb. 27 9:00 – 12:00 p.m.

PLEASE NOTE ONLY IN-PERSON REGISTRATIONS WILL BE ACCEPTED

This program is open to Clifton residents **ONLY**.

Please bring proof of residency and copy of birth certificates to registration, required at time of registration – **NO EXCEPTIONS**

Registration Fees: \$75.00 for one child
\$25.00 for each additional child

FOR MORE INFORMATION AND REGISTRATION FORMS PLEASE CHECK OUR WEBSITE AT
www.cliftonamerican.com

CLIFTON AMERICAN DIVISION

2010 Baseball-Softball-Tee Ball Registration

BOY GIRL

TODAY'S DATE _____

PLAYER'S NAME _____ BIRTHDATE _____

STREET _____ CITY _____ ZIP _____

HOME# _____ CELL _____ SCHOOL _____ GRADE _____ AGE _____

EMAIL ADDRESS _____

SHIRT SIZE _____ PANT SIZE _____

PARENT(S) OR GUARDIAN(S) NAMES _____

I/We, the parent(s)/guardian(s) of the above named candidate for a position on a baseball/softball/tee ball team, hereby give my/our approval to participate in any and all baseball/softball/tee ball activities, including transportation to and from the activities. I/We know that participation in baseball/softball/tee ball 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 the local Clifton Recreation Department, Clifton Athletic Association, Clifton American Division, the organizers, sponsors, supervisors, participants, and persons transporting my/our child/children to and from activities for any claims arising out of any injury to my/our child/children whether the result of negligence or for any other cause, except to the amount covered by accident or liability insurance. 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. Failure to return uniform will result in up to a \$50 uniform replacement fee.

I/We will furnish a copy of a birth certificate of the above named candidate to Clifton American Division League Officials if requested.

PARENT(S) OR GUARDIAN(S) SIGNATURE _____

INTERESTED IN: MANAGING _____ COACHING _____ VOLUNTEERING _____ RUTGERS CERTIFIED _____

2010 FEES: \$75 for 1st child, \$25 for each additional child

***** FUNDRAISER *****

TAGGING (Mandatory of **ALL T-Ball & JD players**) – Tagging consists of a one hour commitment, collecting donations in front of one of Clifton's businesses. In place of Tagging you may satisfy this requirement by paying, **at the time of registration**, an additional \$20 per player. Please initial your choice:

_____ MY CHILD WILL TAG FOR ONE HOUR _____ I WILL PAY \$20 AND NOT

***** KITCHEN DUTY *****

MANDATORY – Every player is **required** to have an adult represent him/her for assistance in the Mt. Prospect, Curie or Sperling kitchens, two games per season, according to a schedule prepared by the Team Manager or Team Parent. Please initial your agreement:

I AGREE TO PROVIDE ASSISTANCE ACCORDING TO THE ABOVE REQUIREMENT _____ (please initial)

***** CODE OF CONDUCT *****

I HAVE READ AND AGREE TO THE CODE OF CONDUCT _____ (please initial)

***** DO NOT WRITE IN THIS BOX *****

PAID TAGGING YES _____ NO _____ N/A _____

COLLECTED \$ _____ CASH _____ CHECK NO. _____ DATE RECEIVED _____ RECEIVED BY _____

MEDICAL FORM YES _____ NO _____