

Little Sluggers Rookie Sports Baseball

Little Sluggers Rookie Sports T-Ball (Ages 3-4)

Spring Session: Thursdays April 23—May 28; 6:15 - 7:00 PM

Summer Session: Thursdays June 18—July 30*; 6:15 - 7:00 PM * No Class 7/2*

Cost per child: \$60 one session; \$110 for both sessions

Parkview Softball Green Field

Limits: Min of 10, Max of 32

Players will be introduced to the fundamentals of the game in a supportive and fun atmosphere. Each week will include an instructional portion followed by a modified game. Parent involvement is strongly encouraged. Players must bring own glove.

Little Sluggers Rookie Coach Pitch Baseball (Ages 5-6)

Spring Session: Thursdays April 23—May 28; 7:00 - 8:00 PM

Summer Session: Thursdays June 18—July 30*; 7:00 - 8:00 PM * No Class 7/2*

Cost per child: \$60 one session; \$110 for both sessions

Parkview Softball Green Field

Limits: Min of 10, Max of 32

Players will be introduced to the fundamentals of the game and will include an instructional portion followed by a coach pitch game. Parent involvement is strongly encouraged. Players must bring own glove.

Registration Starts March 10

To Register with Mayfield Village:

- ◆ **Visit** www.mayfieldvillage.com/recreation
- Call: 440-461-5163 to pay over phone
 - Mail form along with Payment to:

6622 Wilson Mills Road, Mayfield Village, 44143

Payment Forms Accepted:

Mastercard/Visa/Discover

Checks Made Payable to Mayfield Village

Or Cash



To Register with Mayfield Heights:

Visit www.mayfieldheights.org

Call: 440-442-2627 to pay over phone

Mail form along with Payment to:

6154 Mayfield Road, Mayfield Heights, 44124

Payment Forms Accepted:

Mastercard/Visa/American Express/Discover

Checks Made Payable to <u>City Of Mayfield</u>
<u>Heights</u>



Or Cash

Child's Name	MaleFem	aleD.O.B
Address		
(Street)	(City)	(Zip)
Phone #	Email	
Check that best applies:		
SPRING SESSION:T-Ball (\$60)	Coach Pitch (\$60)	
SUMMER SESSION:T-Ball (\$60)	Coach Pitch (\$60)	
Both Sessions T-Ball (\$11	LO)Both Sessions Coach Pi	tch (\$110)
Shirt Size:Child Sm.(6-8)	Child Med. (10-12)	
MC/Visa/Disc/Am. Ex Credit Card #		Exp. DateCode
I understand, being the parent/guardian of the above mentioned minor child while he/she participates in the Mayfield Village and dersigned further fully understands that the employees, officials, Sluggers Rookie Sports Baseball Program cannot guarantee the a release and discharge Mayfield Village and Mayfield Heights, Roall liability for injury to the said minor child, and further agrees to Rookie Sports in which the Little Sluggers Rookie Sports Baseball from any judgment, settlement, or cost of defense in connection	Mayfield Heights Little Sluggers Rookie S and volunteers of Rookie Sports adminis bsolute safety of said minor child. The un okie Sports, its employees, officials and vo b hold harmless and indemnify Mayfield N Program participates, its employees, officials	ports Baseball Program. The un- itering and supervising the Little indersigned does hereby expressly colunteer personnel from any and fillage, Mayfield Heights and cials and any volunteer personnel
SIGNATURE OF PARENT OR GUARDIAN:		Date: