

BOURNE YOUTH GIRLS SOFTBALL

2010 SPRING REGISTRATION

Mail registration forms to: BYGS, PO Box 1668, Sagamore Beach, MA 02562

Include your check or money order payable to BYGS, or Register at the Community Center:
Monday Feb. 8th 6pm-8pm, Wednesday Feb. 10th 6pm-8pm, and/or Saturday Feb. 13th 9am to 1pm

Mail-in registrations must be received no later than March 31st. Walk up registrations will be accepted through the day of evaluations. Please note: Registrations will not be accepted without payment in full and signed and dated waiver forms. BYGS reserves the right to pursue all available options to collect any funds owed as the result of a dishonored check. Returned checks will be subject to a \$25 returned check fee to offset bank fees and administrative costs, full payment of balance due will be required within ten (10) days. Thank you for your cooperation.

ELIGIBILITY: Girls residing in Bourne, enrolled in grades 1 through 8. All players must reside in the town of Bourne, no exceptions.

FEES:

Major and Minor League:	\$65 first player
Instructional league:	\$35
Maximum cost per family:	\$110

EVALUATIONS: Saturday, April 3rd for minor league (grades 3-5) and for major league (grades 6-8). There are no evaluations for the instructional league. Evaluations will be held at the Bourne Middle School in the gymnasium. All participants should wear sneakers. All registered players should attend. All girls will be placed on teams, regardless of ability. Please keep this sheet as a reminder of your evaluation time.

MINORS (Sat. 4/3):

GRADE 3 9am
GRADE 4 10am
GRADE 5 11am

MAJORS (Sat. 4/3):

GRADE 6 12noon
GRADE 7 1pm
GRADE 8 1pm

INSTRUCTIONAL:

GRADE 1 No Evaluations
GRADE 2 No Evaluations

Be advised that games and practices may be held on any day of the week based on field availability. Each player will receive a uniform consisting of one shirt and one pair of pants. Players will be required to supply their own fielding glove. All other required equipment will be provided by the league.

SWEATSHIRTS: As in years past, we will once again be taking orders for Bourne Youth Softball sweatshirts. **Purchase of sweatshirts is optional. Cost of sweatshirts is in addition to registration fees.** Cost for 2010 will be \$35.00 per sweatshirt. You are under no obligation to make a purchase.

Sweatshirt design will be similar to in years past. Color will be purple with white lettering designating Bourne Youth Softball on each sweatshirt. Sweatshirts will be hooded and will have a name embroidered on the sleeve.

If you wish to order a sweatshirt, please fill out the appropriate section of the registration form and include your payment along with your registration fee. Sweatshirt orders cannot be accepted without payment. Please make all checks payable to BYGS. Thank you.

QUESTIONS: Call Erick Anderson (508-292-7020), Mark Melchionda (508-888-6876), Bob Zapotocky (508-833-3530) or visit www.bourneyouthsoftball.org

BOURNE YOUTH GIRLS SOFTBALL

2010 PROGRAM BOOK ADVERTISING & SPONSORSHIP FORM

Place a special message for your son, daughter, and friend or advertise your business and show your support for the Purple Wave. If anyone (family, friends, or businesses) would like to make a donation without buying an ad, they are certainly welcome to do so.

Contact Name: _____ **Signature:** _____

Business/Organization: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: (____) _____ **Email:** _____

Circle One: *Ad is complete & attached to this form Ad will be emailed Ad is text only written here* _____

Amount of donation (instead of or in addition to ad): _____

Payment enclosed by: *Cash Check Money Order Sold by:* _____

Check Ad Size:

_____ **Fastpitch Footnotes - \$5** Family, friends and team members can purchase Fastpitch Footnotes space to send a message to someone on any team, attendee or coaching staff. You choose the text (for example): "To Kyra, my favorite softball player, love Grandma and Grandpa" or "Best of luck to the Purple Wave", etc. These Fastpitch Footnotes will be placed on pages between ads or on full sheets with other footnotes.

_____ **Business Card - \$25.00** 3 1/2" w x 2" h

_____ **Quarter Page - \$35.00** 4" w x 5" h

_____ **Half page - \$50.00** 8" w x 5" h

_____ **Full page - \$100.00** 8" w x 10" h

_____ **Premium Inside Front Cover - \$125.00** 8" w x 10" h

_____ **Premium First or Last Page - \$125.00** 8" w x 10" h

_____ **Premium Inside Back Cover - \$125.00** 8" w x 10" h

_____ **Premium Outside Back Cover - \$175.00** 8" w x 10" h

Premium ads are first come, first served & must have approval from BYGS coordinators.

_____ **Grandslam Team Sponsorship - \$225.00** this contribution includes Namedrop on back of jerseys, your business name, phone number, and company logo will appear in our 2010 Program Book and displayed on our website for the entire season. The league will also provide a Thank You Plaque with a team photo.

Advertising deadline is May 15, 2010. Payment, final ad and art must be received by the deadline to have placement in the program book. All ads print in black ink on white paper. Complete ads must be in .jpg, publisher file, or hard copy (black and white) for scanning. Reservations will be taken on a first-come, first-served basis until we reach our deadline or run out of space.

Please mail the completed form, ad copy and payment to:

BYGS, PO Box 1668, Sagamore Beach, MA 02562

Top portion to be returned to BYGS w/payment; below portion to be kept by ad purchaser/donor

>>>>>>>Cut here - - - - -BELOW IS YOUR RECEIPT - - - - - Cut here<<<<<<<<

Name of business or individual: _____

Size and price of ad(s) purchased: _____

Amount of donation (instead of/in addition to an ad): _____

Sold by _____ Date _____

Your ad is tax deductible, as provided by law, either as a business advertising expense or as a charitable contribution. Bourne Youth Girls Softball is a non-profit corporation. Our tax ID number is 68-0576555. Each advertiser will receive a complimentary copy of the Bourne Youth Girls Softball Program Book

**BOURNE YOUTH GIRLS SOFTBALL
2010 SPRING REGISTRATION**

Players Name: _____

Parent or Guardian's Name: _____

Mailing Address: _____

Street Address: _____

Phone: _____ Alternate Phone: _____

email Address: _____

Grade: _____ Date of Birth (mm/dd/yyyy): _____ Years Experience _____

Parent/Guardian Signature: _____

PARENTS: I can help: Coaching* _____ Asst. Coaching* _____ Team Sponsor (see below) _____

* - Please note: All coaches and volunteers are subject to a CORI background check.

Player's Shirt Size (Circle One): Youth S Youth M Youth L Adult S Adult M Adult L Adult XL

Player's Pant Size (Circle One): Youth S Youth M Youth L Adult S Adult M Adult L Adult XL

Circle One: I authorize I DO NOT authorize Bourne Youth Girls Softball to use photographs or images of my child taken during Bourne Youth Girls Softball programs in promotional material, which may include but is not limited to flyers, notices, bulletin boards or league websites.

SPONSORSHIP INFORMATION (OPTIONAL)

If you wish to be a Team Sponsor please complete the information below and enclose a check.

Grand Slam Sponsorship - \$225 this contribution includes Namedrop on back of jerseys, your business name, phone number, and company logo will appear in our 2010 Program Book and displayed on our website for the entire season. The league will also provide a Thank You Plaque with a team photo.

Company Name: _____ Contact Name: _____

Company Address: _____ Contact Phone: _____

_____ Company Phone: _____

Web site: _____ E-mail: _____

SWEATSHIRT ORDERING INFORMATION (OPTIONAL)

If you wish to order a sweatshirt, please fill out the form below and include your payment of \$35.00 in addition to your registration fee. Sweatshirt orders cannot be accepted without payment.

Player's Name: _____

Sweatshirt Size (Circle One): Adult S Adult M Adult L Adult XL Adult 2XL

Youth S Youth M Youth L

Name or nickname to be embroidered on sleeve: _____

**You must also sign and return the attached medical and liability waiver with your completed registration.
Thank you!**

Parental Waiver, Release of Liability, Indemnification and Consent Form

I, the undersigned, as the parent or legal guardian of the child named below, do hereby give my full consent and approval for my child to participate as a member Bourne Youth Girls Softball ("the league").

I understand that there are certain risks of damages and injuries, including death, inherent in the practice and play of softball, as well as in traveling and other related activities incidental to my child's participation including but not limited to fundraisers, evaluations and clinics, and I am willing to assume these risks on behalf of my child. These risks include but are not limited to those hazards associated with weather conditions, travel, playing conditions, equipment and other participants.

I understand that the very nature of the game of softball is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to my child and to other players.

I hereby certify that my child is fully capable of participating in the designated sport and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as made known to coaches and officials of the team and league.

Further, I agree that in consideration for the right to allow my child to participate as a member of the team designated below and in consideration for permission to play on the fields arranged for by the team or league:

1. On behalf of my child and myself, I do voluntarily elect to accept and solely assume all risks of injury incurred or suffered by my child (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as team member or observer during practice or play by other teams or by other players on my child's team, and (c) while on or upon the premises of any and all of the fields arranged for by my team or league for practice or play.

2. In addition to giving my full consent for my child's participation, I do hereby waive, release, discharge and agree not to sue Bourne Youth Girls Softball, the Town of Bourne, the Bourne Recreation Department, the owner or operator of any fields, the Amateur Softball Association of America, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, town, field or Amateur Softball Association of America for any claim, damages, costs including attorneys fees, or cause of action which I or my child have or may have in the future as a result of damages, injuries, including death, sustained or incurred by my child from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released.

I further agree on behalf of myself and my child listed below, that I shall forever hold harmless and fully indemnify the parties hereby release from any and all claims, damages, costs including attorney fees, and causes of action which may arise from any cause of action made by me or by, through or on behalf of my child, even if the damages, injuries or death are caused in whole or in part by any of the persons or entities hereby released.

I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

Name of Child (Print) Name of Parent/Guardian Signature of Parent Date

Medical Release

I understand that every effort will be made to contact me in case of an emergency requiring medical attention for my child. However, if I cannot be reached, I hereby authorize Bourne Youth Girls Softball to arrange transportation to the nearest hospital and to secure any necessary medical treatment. I also authorize Bourne Youth Girls Softball to administer First Aid to treat my child when appropriate.

Name of Child (Print) Name of Parent/Guardian Signature of Parent Date

THIS FORM IS MANDATORY