2017 OLMSTED COMMUNITY SUMMER LEAGUE REGISTRATION

ONLINE REGISTRATION: FEBRUARY 1st through MARCH 31st, 2017 Make Checks Payable to: Olmsted Community Center

OR MAIL FORMS TO: O.C.S.L. c/o Olmsted Community Center 8170 Mapleway Drive Olmsted Falls, Ohio 44138 VISIT OUR WEBSITE More Info & Forms www.ocslinfo.org www.olmstedcc.com ANY QUESTIONS PLEASE CALL: (440) 427-1599

ONE REGISTRATION FORM REQUIRED FOR EACH PLAYER

PLAYERS NAME	(M/F) HOME PHONE #	
PARENTS NAME	CELLPHONE #	
ADDRESS	CITY	
BIRTH DATE/SCHOOL	AGE AS OF 8/1/2017	
DESIRED LEAGUEC	ONTACT E-MAIL	
DESIRED SHIRT SIZE (CIRCLE ONE): YOUTH	S M L ADULT S M L XL XXL XXXL	
Information provided is for OCSL use only. NO information is sold or distributed outside this organization. REGISTRATIONS MAY BE LIMITED DUE TO FIELD AVAILABILITY		
LEAGUE	AGE	FEE
Tykes Girls & Boys	4 thru 6 (6 yr olds can register for either Tykes or Coach Pitch)	\$70.00
Coach Pitch Girls	6 thru 8 (6 yr olds can register for either Tykes or Coach Pitch)	\$75.00
Coach Pitch Boys	6 thru 8 (6 yr olds can register for either Tykes or Coach Pitch)	\$75.00
Intermediate Girls Travel (Slow Pitch)	9 thru 12 (12 yr olds can register for either Intermediate or Major)	
Intermediate Boys	9 thru 11	\$80.00
Boys Minor	12 thru 14	\$90.00
Girls Major Travel (Slow Pitch) - JV	12 thru 15 (15 yr olds can register for either JV or Varsity)	\$95.00
Girls Major Travel (Slow Pitch) - Varsity	15 thru 18 (graduating senior)	\$95.00
Boys Classic Travel	15 thru 18 (graduating senior)	\$105.00
Register on or before February 28 ^{th,} 20	17, to earn a \$5 discount per player.	
	31 ^{st,} 2017, is \$235.00. Late fees are not included in the family m	aximum.
Proof of age may be required at a later date		

NO REFUNDS

After March 31st, 2017, a \$20.00 per player LATE FEE will be charged above and beyond all normal fees. Late Registration will only be accepted until April 15th, 2017, if there is available space in the desired league(s).

VOLUNTEERS NEEDED:OCSL is currently seeking volunteers. Please circle below where you wish to help.COACHASST. COACHLEAGUE REPSSPONSOR

MEDICAL INFORMATION Does the participant have any medical concerns, such as allergies, heart condition, asthma, etc. that OCSL should be aware of Yes_____No_____ if YES PLEASE EXPLAIN______

RELEASE/CONSENT The undersigned parent/guardian/participant does hereby give his/her consent to participate in the OCSL program for the above named season; which provides supervised baseball activities. I agree to assume all the risks and hazards incidental to the conduct of the OCSL sponsored activities; and I release, absolve, indemnify, and hold harmless the OCSL, including its board of directors, and the organizers, sponsors, and or any of the supervisors appointed by them. As a parent/guardian, I likewise release from responsibility any person transporting my child to or from any activity. OCSL may capture photographs and use them for purposes of promotion, illustration and web content. By completing this form you agree that OCSL may use image(s) of these registered player(s) in this capacity. If you do not wish for images of your player(s) to be used in this capacity, please reach out to OCSL's President, Jill Lukes at jill.lukes@gmail.com, to abstain.