



VAUGHAN VIKINGS

2010 BASEBALL & SOFTBALL REGISTRATION FORM



PLAYER INFORMATION			
Name			
	Given Name	Surname	
Birthdate	/ /	Sex	Years Played
	Year Month Day	M/F	

CONFERENCE	
East	
Maple/Concord/Thornhill	<input type="checkbox"/>
West	
Woodbridge/Kleinburg	<input type="checkbox"/>
IF APPLICABLE	

PARENT/GUARDIAN INFORMATION			
Name			
	Given Name	Surname	
Address			ON
	Street	Municipality	Postal Code
Phone	()	()	
	Home	Other	
E-Mail			
Parent Volunteer:	Coach <input type="checkbox"/>	Asst. Coach <input type="checkbox"/>	Convenor <input type="checkbox"/>
	Please Check Preference		
Sponsor	<input type="checkbox"/>		
Memo			
	Special Notes		

BASEBALL HOUSE LEAGUE FEES			
Born	Division	Fee	After March 15th 2010
2005/06	Jr. T-Ball	\$135	\$185
2003/04	Sr. T-Ball	\$160	\$210
2002	Jr. Rookie Ball	\$215	\$265
2001	Sr. Rookie Ball	\$215	\$265
1999/2000	Mosquito	\$240	\$290
1997/98	Pee Wee	\$260	\$310
1995/96	Bantam	\$275	\$325
1991/94	Midget	\$275	\$325
Select		\$545	\$595
REP		\$595	\$645

GIRL'S SOFTBALL FEES			
Born	Division	Fee	After March 15th 2010
2002/03	5-Pitch	\$210	\$260
2000/01	Mites	\$210	\$260
1998/99	Squirts	\$235	\$285
1996/97	Novice	\$235	\$285
1995 + UP	Bantam	\$275	\$325

TERMS & CONDITIONS		
<p>1) City of Vaughan Baseball Association (CVBA) and City of Vaughan Softball Association (CVSA) will attempt to accommodate every interested player. However places may be limited. Acceptance of every registration cannot be guaranteed.</p> <p>2) Cancellations accepted in writing up to April 1, 2010. (Registration fee minus \$50.00 administration fee, each cancellation.) ABSOLUTELY NO REFUNDS AFTER APRIL 1st.</p> <p>3) Registrations are only bonified on full payment. There will be a \$50 charge for any returned cheque.</p> <p>4) Families registering more than 2 children are entitled to a 50% discount on subsequent House League registrations. (Discounts are to be applied to the lowest registration fees.)</p> <p>5) Parents/Guardians are responsible that the participant is in good health and holds sufficient medical coverage.</p> <p>6) CVBA/CVSA will not guarantee assignment of players to specific teams.</p> <p>7) CVBA/CVSA reserves the right to move players to other teams for the purpose of balancing based on skill level.</p> <p>8) Due to the nature of this sport, I acknowledge that I am aware that there may be risks due to injuries that may be caused by this sport, and by participating in this sport voluntarily, I agree to be fully responsible for any injury and or loss which may arise by playing.</p> <p>9) All the information above is correct and complete.</p> <p>PRIVACY STATEMENT CVBA/CVSA recognizes the importance of protecting the privacy of CVBA/CVSA members. Any information collected, including member registrations, photos, and/or correspondence, will only be used for the purpose of conducting CVBA/CVSA business.</p> <p>WAIVER In consideration of allowing my child to play in the CITY OF VAUGHAN BASEBALL/SOFTBALL ASSOCIATION, I as undersigned, for myself, my heirs, executors, administrators, and assigns, shall and do hereby exonerate the said Association, its successors and assigns, and hold it harmless from all claims, suits, and liabilities whatsoever their nature and howsoever they may arise by reason of said Association allowing my child to participate or otherwise in any of the activities sponsored by the CITY OF VAUGHAN BASEBALL/SOFTBALL ASSOCIATION. Permission is granted to the CVBA/CVSA, its employees, agents and representatives to transport the above named registrant to a local hospital for medical treatment, if necessary. Acceptance of registration will be subject to CVBA/CVSA executive approval.</p> <p>I understand and agree to the Terms & Conditions, Waiver and Privacy Statement.</p>		
<table style="width:100%;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;">Parent/Guardian: Signature</td> <td style="width: 40%; border-bottom: 1px solid black;">Date</td> </tr> </table>	Parent/Guardian: Signature	Date
Parent/Guardian: Signature	Date	

OFFICE USE ONLY
Date: ____/____/____ Year Month Day
Registration Amount: \$ _____
VISA <input type="checkbox"/> Amount _____
M/C <input type="checkbox"/> Amount _____
Cheque <input type="checkbox"/> Amount _____
Make Cheques payable to CVBA
Cheque# and Name _____
Credit Card # _____
Expiry Date _____
Approval Code: _____
Date: _____
REGISTRAR: _____