

Rocky River Recreation
 21016 Hilliard Blvd.
 Rocky River OH 44116
 895-2599 or 356-5657



Pony League Baseball Grades 7-8

Spring & summer recreational baseball league for boys completing Grades 7-8. All games played at Elmwood Park. Team uniforms are provided.

Team Assignments:

Please, no requests. Teams are made up based on several factors (player evaluations, grade levels, coaches, pitchers & catchers, etc.) Specific requests cannot be accepted. The Recreation Dept. reserves the right to make changes in team assignments as necessary.

- Practices begin week of May 3 for 2 weeks
- Games begin week of May 17 and are played on weekday evenings; 2 games a week most weeks.
- Playoffs: begin week of July 12

COST:
Member: \$60
Resident: \$65
Non-Res: \$84 if space after April 11

**NEW PLAYER
 EVALUATIONS**

**Thursday April 22 at Rocky River
 High School Gyms
 7:15-8:00 PM**

For those players *who did not play* in either Rocky River Little League or Pony League last year.

Bring your glove.
 Please make every effort to attend.

Coaches' Corner

Parents volunteer to coach Pony League. If you are able to be a Head Coach or Assistant Coach, please mark your name on the registration form. Two parents may request to coach together, but all coaching assignments are subject to approval by the Recreation Dept. Coaches will be notified PRIOR to the coaches' meeting with additional information.

COACHES MEETING:
**Wed. April 28, 6:00 PM, at the
 Civic Center Multi-Purpose Room**

Receive team rosters, equipment, pick practices, go over rules, etc.

Register MARCH 1-APRIL 11 to guarantee your spot.

Use registration form below.

Return to Rocky River Civic Center 21016 Hilliard, Rocky River 44116

440-895-2599

PONY LEAGUE BASEBALL REGISTRATION 2010

WEB

PLAYERS:
 Did you play RR Little League last year? yes no
 Did you play Pony League last year? yes no
CHECK LEAGUE & CURRENT GRADE
 Pony League Gr. 7 Gr. 8
COST:
Member: \$60 Resident: \$65
Non-Res: \$84 if space after April 11

PARENTS: COACHES AND ASSISTANTS ARE NEEDED.
 YES, I would like to coach my child's team
 YES, I could be an ASSISTANT coach only
 SORRY, I CANNOT HELP COACH THIS SEASON.
 Coach Name _____
 Daytime Phone # _____
 I would like to coach with: _____
 (name of other parent if you have a preference)

Return completed form to Rocky River Civic Center
 21016 Hilliard Blvd. Rocky River 44116 440-895-2599

Student Name _____ Grade _____ Male Female Birthdate ____/____/____
 Address _____ City _____ Zip _____
 Home Phone _____ Parent Name _____ Work Phone _____
 School _____ E-Mail Address _____

WAIVER and RELEASE: In consideration of the City of Rocky River Recreation Dept. accepting my or my child's entry, I hereby for myself, my child, my heirs, executors, and administrators waive and release any and all rights and claims for damages I or my child may have against the City of Rocky River Recreation Dept., its employees, agents and independent contractors. I do hereby hold the City of Rocky River blameless of and from any and all liability which may arise out of or result from participation in the recreational program. My registration indicates that I have read and understand information relevant to my program choice. I understand that photographs of participants may be used for marketing or promotional purposes for the Recreation Dept. and hereby grant permission for my or my child's photograph to appear in such promotional literature.

Parent or Guardian Signature _____ DATE: ____/____/____

Amount paid: \$ _____ Visa/Mastercard/Discover # _____ / _____ / _____
 Cash Check Expiration Date ____/____

Cashier: _____ Approval # _____ Transaction # _____