

**C.C.G.S.**  
**SOFTBALL REGISTRATION 2009**  
**Kindergarten through 6th Grade**  
**DEADLINE April 3<sup>rd</sup>, 2009**

All registrations must be turned in by April 3<sup>rd</sup> 2009. There will be a LATE FEE of \$5.00 if not postmarked by April 3rd, 2009. No Players will be added after April 30<sup>th</sup>, 2009.

Our Girls Softball program relies on volunteers, from commissioners, to Coaches and Umpires. With your continued support everyone can have a fun, learning and rewarding time. So Parents Bring Your Softball Glove. If you have any questions, please feel free to call the C.C.G.S. league News Phone Number 841-5108. The Coaches meeting will be held April 25th, 2009, at 9:00 a.m. If your coaches are unable to attend please send a representative of your team. (Coaches will be contacted and rosters distributed to the coaches via e-mail by April 24th 2009.)

**PLEASE NOTE:** Complete and detach bottom portion of this form and mail it with the registration fee: \$25.00 per child in the league. Make your checks payable to C.C.G.S, and mail to C.C.G.S. 7425 Prairie Hawk Dr. S.W. Cedar Rapids, Ia. 52404 Mail by April 3rd, 2009, also make sure to mark the child's shirt size, and sign the bottom of the form. C.C.G.S has a fundraiser every spring this year it will be candy bar sales, if your child does not want to partake, you can enclose \$20.00 tax-deductible donation.

Detach and Mail with Check

\_\_\_\_\_ Kindergarten & 1<sup>st</sup> Grade: T-ball Instructional Level 1  
**Games: Mon. & Weds. May 11th thru June 24<sup>th</sup>**

**Tuition/Child \$25.00**  
**Fund Raiser Exemption \$20.00**

\_\_\_\_\_ 2nd & 3rd Grades: Coach Pitch Instructional Level 2  
**Games: Tues. & Thurs. May 12th, thru June 25th,**

**Total enclosed** \_\_\_\_\_

\_\_\_\_\_ 4th & 5th & 6th Grades: Softball Level 1  
**Games Mon. & Weds. May 11th, thru June 24th.**

Grades 4, 5, 6, : What position does your daughter like to play? \_\_\_\_\_ has she worked on pitching? \_\_\_\_\_.

Child's Name: \_\_\_\_\_ Parents or guardians \_\_\_\_\_

Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ Cell Phone \_\_\_\_\_

e-mail \_\_\_\_\_ Grade \_\_\_\_\_

**Childs Shirt Size (Youth) M L (Adult) S M L XL**

I hereby release and forever discharge the College Community School District and the C.C.G.S., their employees, officers, directors and members, from any and all claims for damages known or unknown, arising out of the injuries sustained by my child or myself as a result of participation in the 2009 C.C.G.S. League. This release includes any injuries or claims that may accrue during practice times, times before or after practice, or during games. I understand that the C.C.G.S. is an association of volunteers and that there are no express or implied warranties of any nature concerning the safety of this program. This Release covers claims that I may have individually, as well as any claims arising out of the parental relationship with my child. In addition, as the parent and the next friend (or guardian) of said child, I am hereby specifically releasing any and all claims that may accrue in my child's name or legal right.

**I UNDERSTAND THAT THIS IS A RELEASE; I HAVE HAD FULL OPPORTUNITY TO REVIEW THIS, CONSULT WITH LEGAL COUNSEL OF MY OWN CHOICE AND AM SIGNING THIS INDIVIDUALLY AND ON BEHALF OF MY CHILD VOLUNTARILY.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**This is a volunteer program and parents are encouraged, and needed to participate whenever possible. If you can help in any of these areas, Please indicate below. WE ARE IN NEED OF SPONSORS THIS YEAR TO COVER ALL THE TEAMS. SPONSOR AMOUNT \$100.00 AND ENCLOSE ARTWORK, OR BUSINESS CARD. YOUR BUSINESS NAME WILL BE ON THE SHIRTS AND SCHEDULES. THE GIRLS THANK YOU!!!!!**

Coach \_\_\_\_\_ Assistant \_\_\_\_\_ SPONSOR \_\_\_\_\_