

**Souderton Area Baseball League, Inc.**  
**Official Registration Form – Please Read Carefully Before Signing**

To the Parent or Guardian:

Thank you for choosing SABL! Please remember that this is a community league, run by volunteers, to foster a love of baseball/softball among our children. We invite you to help in any way you can, through coaching, auxiliary, umpiring, and by supporting your child's coach throughout the season. Please determine your child's age bracket and fees based on the table below, and fill out the registration form legibly and accurately. We look forward to your and your child's participation in a great season!

**Questions or Concerns?**

**Boy's Vice President: Paul Kovack 215-799-0176**      **Girl's Vice President: Carol Bauer 215-721-4108**  
 Please visit our website: [www.sabl.org](http://www.sabl.org) for more league information or other Board Member information

**League Age Brackets**

<b>Boy's Baseball</b>	<b>Age As Of May 1, 2010</b>	<b>Fee<sup>+</sup></b>	<b>Girl's Softball</b>	<b>Age As Of Jan 1, 2010</b>	<b>Fee<sup>+</sup></b>
*T-BALL	5	\$ 85.00			
PONY I	6-7	\$ 85.00	CHERUB	6-7-8	\$ 85.00
PONY II	8	\$ 85.00	U/10	9-10	\$ 85.00
MINOR	9-10	\$ 100.00	U/12	11-12	\$ 95.00
MAJOR	11-12	\$ 100.00	**JUNIOR	13-14	\$ 95.00
**CONNIE MACK	13-16	\$ 120.00	**SENIOR	15-18	\$ 95.00

FAMILY MAXIMUM \$ 225.00 **DOES NOT INCLUDE CONNIE MACK**

\*T-BALL is Co-ed and is based on player's age as of May 1, 2010

\*\*Connie Mack and Junior/Senior Leagues participate in travel leagues with surrounding communities

**\*Registration forms received after January 31 must include a \$10 Late Fee per player. Forms received after March 1 will be placed on a first come, first serve waiting list. All late registrations MUST be mailed to PO Box 64766, Souderton, PA 18964.**

**Was your child registered in 2009?**  Yes  No      **Sex**  Male  Female      **Shirt Size** \_\_\_\_\_

**Child's Name** \_\_\_\_\_  
Last Name First Name

**Phone Number** \_\_\_\_\_ **Alternate Phone Number** \_\_\_\_\_

**Email** \_\_\_\_\_ **Alternate Email** \_\_\_\_\_

**Address** \_\_\_\_\_  
House # and/or Apt #, Street Name City State Zip Code

**Boy's Age after May 1, 2010** \_\_\_\_\_ **Birthdate** \_\_\_\_\_  
mm/dd/yyyy

**Girl's Age after January 1, 2010** \_\_\_\_\_ **Birthdate** \_\_\_\_\_  
mm/dd/yyyy

**Last Level Played**      PONY I      PONY II      MINOR      MAJOR      CONNIE MACK  
 (Circle one)      T-BALL      CHERUB      U/10      U/12      JUNIOR      SENIOR

**Last Year's Coach Name** \_\_\_\_\_

**Can you volunteer?**       Head Coach       Asst Coach       Umpire       Team or Bench Parent

**Father's Name** \_\_\_\_\_ **Mother's Name** \_\_\_\_\_

I/We the parent(s) guardian(s) of the above mentioned boy/girl who is a candidate for a position in a Souderton Area Baseball League team, hereby give my/our approval to his/her participation in any and all activities of this league during the current season. I/We assume all the risks and hazards incidental to the conduct of the activities and transportation to and from these activities. I/We further hereby release, absolve, indemnify, and hold harmless the Souderton Area Baseball League, the Organizers, Sponsors, or any of the Supervisors appointed to them. I/We likewise waive to the extent not covered by liability insurance any claim against any person transporting my son/daughter to or from these activities. I/We will furnish a certified birth certificate of the above candidate upon request of league officials. I/We hereby agree to reimburse the league for uniforms not returned to my son's/daughter's coach by September 1, 2010, \$50.00 for uniforms deemed returnable by the league.

X \_\_\_\_\_ Date \_\_\_\_\_

I have read and understand the functions of the league as described above, and hereby agree to comply by these specifications by signing at the above "X."

**FOR LEAGUE REPRESENTATIVE USE ONLY**

**League Rep Name** \_\_\_\_\_ **Amount** \_\_\_\_\_  
**Family Maximum** \_\_\_\_\_ **Circle and Complete: CASH OR CHECK#** \_\_\_\_\_