



# www.waabaseball.org

## WAA BASEBALL REGISTRATION

**SIGN UP EARLY, LIMITED SPACE AVAILABLE**

**MUST MEET RESIDENCY REQUIREMENTS**  
(See web site for details)

### REGISTRATION

**ONLINE** at www.waabaseball.org for those who played last year

**IN PERSON** ON SATURDAY, JANUARY 9 and JANUARY 23, 2010  
from 11AM - 3PM at Webster Parks and Recreation (Ridgecrest)

Located on Ebner Drive  
(Ebner runs off of Ridge Road opposite Friendly's Restaurant)

Those new to WAA **MUST** come in person and bring  
copy of birth certificate for proof of age.

### 2010 WAA BASEBALL

**(BOYS & GIRLS AGES 5-18 as of April 30, 2010)**

	DIVISION	AGE	DAYS/TIME	START/FINISH	COST FOR REGULAR SEASON ONLY
<input type="checkbox"/>	T-BALL	5 - 6 yrs.	Saturday 9 - 10:30 AM	June - July	\$60.00
<input type="checkbox"/>	Developmental	6 <sup>①</sup> - 8 yrs.	Mon. and Thurs. 6 PM	April - June	\$100.00
<input type="checkbox"/>	Rookie	8 - 9 yrs.	Tues. and Fri. 6 PM	April - June	\$100.00
<input type="checkbox"/>	Minor AA	9 - 10 <sup>③</sup> yrs.	Mon. or Wed. 6 PM and every Saturday	April - June	\$130.00
<input type="checkbox"/>	Minor AAA	11 <sup>②</sup> - 12 yrs.	Tues. or Thurs. 6 PM and every Saturday	April - June	\$130.00
<input type="checkbox"/>	Major League	12 yrs.	Tues. or Thurs. 6 PM and every Saturday	April - June	\$130.00
<input type="checkbox"/>	Junior League	12 - 14 yrs.	Mon., Wed., Sat.	May - July	\$160.00
<input type="checkbox"/>	Senior League	14 - 16 yrs.	Tues., Thurs., Sun.	May - July	\$160.00
<input type="checkbox"/>	Big League - Travel	16 - 18 yrs.	Tues., Thurs. and Saturday	June - July	\$160.00
<b>MAXIMUM CHARGE IS \$290.00 PER FAMILY.</b>					<b>TOTAL</b>

① 6 YEAR OLDS REQUESTING TO PLAY IN 7-8 YEAR-OLD DEVELOPMENTAL LEAGUE MUST HAVE COMPLETED ONE YEAR OF LITTLE LEAGUE T-BALL.

② 11 YR OLDS WISHING TO PLAY IN MAJORS MUST ATTEND A SKILLS EVALUATION.

③ Eligible 10 YR OLDS WISHING TO PLAY IN MAJORS OR MINOR AAA MUST ATTEND A SKILLS EVALUATION.

**DAYS/TIMES SUBJECT TO CHANGE DEPENDING ON ENROLLMENT AND FIELD AVAILABILITY.  
IF A PLAYER CANNOT MAKE 75% OF PRACTICES AND GAMES, PLEASE DO NOT SIGN UP.**

# BASEBALL REGISTRATION FORM

## MUST MEET RESIDENCY REQUIREMENT

(See web site for details)

**INSTRUCTIONS:**

- 1). PLEASE COMPLETE A FORM FOR EACH PLAYER. EXTRA FORMS ARE AVAILABLE AT THE WEBSTER PARKS AND REC (RIDGECREST), LIBRARY, THE TOWN HALL OR AT [www.waabaseball.org](http://www.waabaseball.org)
- 2). MAKE CHECKS PAYABLE TO "WAA". PLEASE SEE CHART ON REVERSE SIDE FOR COST. MAXIMUM CHARGE IS \$290.00 PER FAMILY.
- 3). FIRST TIME REGISTRANTS MUST PRESENT A COPY OF THEIR BIRTH CERTIFICATE.
- 4). PLEASE BRING COMPLETED FORMS WITH PAYMENT ON REGISTRATION DAY.

<b>FEE CALCULATION</b>	
<b>TOTAL DUE THIS REGISTRATION</b>	\$ _____
<b>TOTAL DUE SIBLING REGISTRATION</b>	\$ _____
<b>TOTAL DUE SIBLING REGISTRATION</b>	\$ _____
<b>FAMILY SUB-TOTAL</b>	\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
<b>— WAA USE ONLY —</b>	
PLAYER ID# _____	FAMILY ID# _____
<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK # _____
DATE RECEIVED _____	INITIALS _____
<input type="checkbox"/> BIRTH CERTIFICATE	INITIALS _____

**PLEASE PRINT:**

PLAYER'S NAME: \_\_\_\_\_ (CHECK ONE)  MALE  FEMALE

STREET \_\_\_\_\_ TOWN: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ BIRTHDATE: \_\_\_/\_\_\_/\_\_\_ AGE: \_\_\_\_\_ (as of 4/30/10)

MOTHER'S CELL PHONE #: \_\_\_\_\_ FATHER'S CELL PHONE #: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_ FATHER'S NAME: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

TO PLACE ON BROTHER'S/SISTER'S TEAM? PROVIDE SIBLING'S NAME AND AGE: \_\_\_\_\_

**—SIBLINGS ONLY—**

IF CHILD IS NEW TO THE WEBSTER PROGRAM, PLEASE RATE THEIR ABILITY ON A 1 - 9 SCALE. \_\_\_\_\_

1 = BELOW AVERAGE    5 = AVERAGE    7 = ABOVE AVERAGE    9 = EXCELLENT

**FOR ADDITIONAL INFORMATION, GO TO [www.waabaseball.org](http://www.waabaseball.org)**

**THERE WILL BE A SEPARATE REGISTRATION FOR TOURNAMENT/SUMMER/FALL BASEBALL. (JULY - OCTOBER)**

**NO REFUNDS AFTER APRIL 1ST**

SIGNATURE (PARENT OR GUARDIAN) \_\_\_\_\_ DATE: \_\_\_\_\_

## VOLUNTEER TO BE A HEAD COACH/ASSISTANT COACH

NAME: \_\_\_\_\_  HEAD COACH  ASSISTANT COACH

E-MAIL: \_\_\_\_\_ HOME PHONE#: \_\_\_\_\_

PREFERRED PARTNER: \_\_\_\_\_ HOME PHONE#: \_\_\_\_\_

ONE NAME ONLY

**ALL PROSPECTIVE COACHES MUST BRING COPY OF A PHOTO ID TO REGISTRATION AND FILL OUT LITTLE LEAGUE VOLUNTEER APPLICATION FORM.**

FORM AVAILABLE ON WEB SITE AND AT REGISTRATION