



12U & 14U Indoor Hitting Leagues

Perfect Game is offering 12U and 14U Indoor Hitting Leagues starting March 8, 2009. These indoor leagues will be conducted at the Perfect Game facilities in Cedar Rapids. The league will consist of teams of 5 to 6 players with a total of 4 teams per division of the league. Each game will be 7 innings. Every game will use live pitching and catching. There will be an umpire and scorekeeper at every game. Hits and outs are determined by where the ball is hit inside the batting cage. Pitchers are required to wear cleats when pitching, all other turf shoes only. Players will be required to furnish their own bat, glove, and catching equipment. League rosters and game schedules will be posted on the Perfect Game website, www.perfectgame.org. The best mix of players for this league would be one full time catcher, one player with catching skills, and four pitchers. This league will give your son a great opportunity to play baseball and will prepare him for the upcoming baseball season.

12U League

Must be currently 11 or 12 years old.
Games will be played every Sunday
March 8, 2009 thru April 12, 2009 from 1pm-5pm.
League fee is \$90.
Sign up deadline Feb 24, 2009

14 U League

Must be currently 13 or 14 years old
Games will be played every Sunday
March 8, thru April. 12, 2009 from 1pm.-5pm
League fee is \$90.
Signup deadline is Feb 24, 2009

Any questions, Call Ron Benich at Perfect Game: 319-298-2923
Or by e-mail at Rbenich@perfectgame.org

Fill out form below and send with payment and medical release to Perfect Game

Please sign me up for the league:

Sign me up and place me on a team
 Sign me up as part of a team (list other
Team members on the back of this sheet).
Call **319-298-2923** to sign up by credit card.
We accept Visa, Mastercard, American Express
and Discover.
Make checks payable to Perfect Game and mail to:
Perfect Game
1203 Rockford Road SW
Cedar Rapids, IA 52404

Name _____
Address _____
City/St/Zip _____
Phone(s) _____
DOB _____ Age Group _____
School _____
Bats _____ Throws _____



MEDICAL INFO/RELEASE FORM-2009 WINTER LEAGUE
Please read carefully before signing!!!

Participant's Name _____ Ph.# _____ Age _____ DOB _____

Address _____ City/St/Zip _____

Parent/Guardian Name _____ Parent's work # _____

Important Medical Information

Emergency contact
(other than parents) _____ Emergency contact ph. # _____

Is this participant currently taking medication? Yes or No

If yes, what is the medication? _____

How often is the medication taken? _____

What is the purpose of the medication _____

Is the participant Allergic to anything and what? _____

Are there any physical limitations, special circumstances, or other information we should be aware of? _____

I approve my child's/ward's participation at all Perfect Game, Inc/BaseballWebTV sponsored activities. I expressly represent to Perfect Game, Inc. that my child/ward is in good health and physically capable of participating in any and all activities sponsored and associated with Perfect Game, Inc. I authorize Perfect Game, Inc., or its representative to request and obtain emergency medical treatment for myself or my child/ward as the circumstances may require and in connection with this authorization I hereby waive and release the right to authorize and give consent for the delivery of medical care/treatment, of whatsoever kind and nature, to my child/ward. I understand that Perfect Game, Inc., its staff members, associates, workers, and anyone associated with Perfect Game, Inc. is harmless and release them from any and all liability for injury as a result of my child's/ward's participation in any activity sponsored by Perfect Game, Inc. This release of liability by me is based upon the recognition that sport activity of any kind or nature clearly involves the risk of injury or hazards to the participants and spectators and I acknowledge that my child/ward and I assume such risks when we participate in activities sponsored by Perfect Game, Inc. **It is understood that once a player/parent signs this agreement and makes payment there will be no refund for any reason.** By signing this agreement, the parents and player agree to abide by all the above, and also agree to give Perfect Game/BaseballWebTV the right to talk to or release information to any or all college programs, Major League teams and scouts, and to put their child's profile/information on the Internet/BaseballWebTV or in Perfect Game/BaseballWebTV literature. **You must sign below, or if under age 18, the parent or guardian of the participant must sign certifying that the above information has been read, complied with, and agreed to.**

Parent or legal Guardian signature _____ Date _____