



Howell Area Junior Baseball Association

Fall-Ball 2008 Program

The Howell Area Junior Baseball Association is proud to announce that we will be offering our ninth consecutive season of Fall Softball.

Fall-Ball is intended to be fun and instructional, preparing kids for the 2009 spring/summer softball season. It is a great way for your child to develop and become a better softball player.

Games will be played, but standings will not be kept and umpires will not be provided.

Registration Deadline is Friday August 8, 2008.

Fall Ball Guidelines:

- * A minimum of three (3) teams per division is needed for that division to be formed.
- * Each Division will be limited to 6 (six) teams.
- * Prospective coaches that did not coach during the spring 2008 season will need to fill out a volunteer coach application form so that a background check can be ran.
- * Selected coaches may protect up to 6 (six) players (including coach/manager kids) from their spring 2008 season team. Only (3) Travel/Tournament team players will be allowed on each team. The remaining players will be selected via a blind draw.
- * Teams will consist of 10-12 players.
- * **The season will run from Monday August 18, 2008 through Friday October 3, 2008.**
- * Firm game and practice schedules will be determined once all registrations are received and teams are selected. **The intention is to play games on Mondays and Wednesdays, but one additional weekday may be added depending on the number of kids that register.**
- * Children will be placed in the division they will play in for the 2009 spring/summer season. It will be based on their age as of **January 1, 2009.**
- * **The divisions are as follows:**
 - Bantam: 6-8 Years Old
 - Midget: 9 and 10 years old
 - Minor: 11 through 14 years old
- * The cost for fall ball is **\$50 per player.** Each player will receive a T-Shirt. Baseball pants, socks and hats **will not** be provided.
- * Please fill out the attached registration form, and drop it off at the Northwest Field concession stand or send it to the PO Box at the top of the registration form. Registration forms must be postmarked no later than August 8, 2008. Please be sure to attach your check for \$50, made out to HAJBA, to the registration form. Please do not expect to be contacted by your team manager until the second week in August.
- * **If you have any questions concerning Fall Ball, please contact Stu Blatt at 517-546-7241 or Desiree French at 517-404-2263. They can also be reached via email at Blattstu@msu.edu or Dillchar@aol.com.**



Howell Area Junior Baseball Association, Inc.
PO Box 241 – Howell, Michigan 48844
Junior Baseball/Softball/T-Ball
2008 Fall Softball Season Registration Form
(Please Print)

Player's Name _____ Date of Birth _____

Address _____ City _____

School District _____ Township _____

Father's Name _____ Email Address _____

Mother's Name _____ Email Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Has your child pitched in a league game before ___ Yes ___ No

Did your child play on a Tournament or Travel Softball team this past Spring/Summer? ___ Yes ___ No

Fall Baseball division Bantam ___ Midget ___ Minor ___

Name of Spring/Summer 2008 Season coach (If Applicable) _____

T-shirt Size: Youth Large ___ Adult Small ___ Adult Medium ___ Adult Large ___ Adult X-Large ___

Are you willing and/or able to coach a team if needed? ___ Yes ___ No

Medical Information

Players' physician _____ Physicians' Phone _____

Are there any known medical conditions or allergies that the Howell Area Junior Baseball Association, Inc., or the player's team manager should be aware of? Yes ___ No ___

If yes, please explain

Insurance Information

Insurance Company _____ Policy Number _____

Agreement

As parent or legal guardian of this player, I understand that Baseball, Softball and T-ball are dangerous sports, and I approve of my child's participation and will not hold the Howell Area Junior Baseball Association, Incorporated, (HAJBA) or any of its representatives responsible in case of accident or injury. Furthermore, I hereby give permission for any and all medical attention necessary to be administered to my child in the event of any accident, injury, sickness, etc. under the direction of the HAJBA staff. This agreement and release is effective for the time during which my child is participating in the HAJBA program and any tournaments for the current season, including traveling to and from such activities. I also hereby assume the responsibility for payment of any such treatment. I agree that my child will not participate with any Baseball, Soft-ball, or T-ball team or program not recognized, or approved, by HAJBA, for the 2008 season, without prior written consent from the HAJBA Board of Directors. I certify that the information on this registration form that I provided is correct.

Parent/Legal Guardian Signature _____ Date _____

Please attach check for \$50, made out to HAJBA, to this registration form, and turn in to Northwest concession stand. If you are completing this form later than July 11, 2008, please mail it to the PO BOX at the top of this form. Mailed in forms must be postmarked no later than August 8, 2008.