

12U 50'x70' Fall Saturday Baseball

Purnell Wrigley Field & Maine's Fenway Park



AYCC
Alfond Youth & Community Center

Boys & Girls Clubs and YMCA of Greater Waterville
at the Alfond Youth & Community Center
126 North Street, Waterville, ME 04901

Phone: 873-0684 Fax: 861-8016 www.clubaycc.org

Ages:	12U Age Division (Based on April 30, 2020 Age – Cal Ripken Guideline)
Season Team Fee:	\$1,150
Program Details:	<u>All Games to be played at Purnell Wrigley Field & Maine's Fenway Park turf fields!</u>
	Saturday Game Dates: September 12 – October 24
	12 Teams Maximum Capacity
	Each team will play 12 games total – 6 Saturdays of Double-Headers/Round Robins
	Games will be 6 innings or 1hr. 45 min. length, whichever comes first
	Following 2020 Cal Ripken Majors 70' Baseball Rules
	All Games will be played on field dimensions of 50' pitching distance; 70' base paths

Informed Consent

I, undersigned, give consent for my child to access the facilities of and participate in programs administered by the Alfond Youth & Community Center. I acknowledge that there are risks associated with all programs and if there are any health concerns a physician should be consulted prior to participation. I understand and agree that the risks in associated with these programs may result in personal injury of any type and accept responsibilities associated with participation in programs and use of facilities.

I grant permission for the Alfond Youth & Community Center to provide care for my child in the event of accident or injury. I grant permission for the Alfond Youth & Community Center to take video and/or photographs of my child for the purpose of marketing and promoting the Alfond Youth & Community Center.

Player Name	Parent Signature	Date
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

2020 12U 50'x70' Fall Saturday Baseball League
Team Roster Form

Team Name: _____

Team Colors: _____

Manager/Head Coach: _____

Phone # & Email: _____

Assistant Coaches: _____

Phone # & Email: _____

Player Name	Jersey #	Age (as of April 30, 2020)	Date of Birth
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

For Office Use Only:

Amount Paid	Receipt #	Date Paid	Member	Scholarship Amount	Amount Due
			Yes No		