



## The Putnam Valley Baseball Association

265 Oscawana Lake Rd.,  
Putnam Valley, NY, 10579  
<http://www.pvball.org/>  
Phone: 845-526-3292, Fax: 845-526-3179

**Commissioner:** Ray Gallagher  
**Executive Members:** Kevin Gallagher, Irv Bomba, Joe Nolan, Ron Ferraro, Ed Lent, John Gutierrez, Tom Patterson, John Millicker, Joe Kesselmark

### FALL BASEBALL 2010: Ages 8 to 12

The Putnam Valley Baseball Association (PVBA), in conjunction with Putnam Valley Parks and Recreation are pleased to be offering a Fall Developmental League for youth who will be age-eligible for Minors (8-9) and Majors (10-12) for the 2011 season. We anticipate breaking the kids into Minors and Majors divisions, depending on final league enrollment.

This program will be playing under the existing rules and is designed to allow the kids to continue their baseball development and HAVE FUN.

#### Details:

- The league will run from early September to late October.
- We will have a team practice during the week and one game scheduled for the weekend (times TBD)
- Costs will be \$65 a child (make checks payable to Putnam Valley Parks and Rec.)
- Players will be broken up into 2 separate divisions based on age, skills, etc. (final breakdown will be based on final league enrollment but the tentative breakdowns are 8/9 will form the one division, and the 10 through 12 players will form the other)
- Sign ups at the Parks & Recreation Office at 265 Oscawana Lk. Rd. (by August 27)
- All games and practices will be on Putnam Valley fields

*I / We, the Parents of the Above-named Candidate, Hereby Give My/Our Approval of His/Her Participation in Any and All Little League Activities. I / We Assume All Risks and Hazards Incidental to Such Participation, Including Transportation to and from the Activities; and I / We Waive, Release, Absolve, Indemnify and Agree to Hold Harmless the Local Little League, the Organizers, Sponsors, Supervisors, Participants, and Parents Transporting My/Our Child(ren) to and from Activities for Any Claim Arising out of Injury to My/Our Child(ren) Whether the Result of Negligence or for Any Other Cause, Except to the Extent and in the Amount Covered by the Accidental or Liability Insurance. I / We Agree to Return Upon Request Any Equipment Issued to My/Our Child(ren) in as Good Condition as When Received Except for Normal Wear and Tear. I / We Agree to Abide by the Rules Set Forth by The Putnam Valley Parks & Recreation Department and its governing baseball body.*

Players Name \_\_\_\_\_

Player's Home Address \_\_\_\_\_

Parent/Player's Primary Email Address \_\_\_\_\_

Player's Age \_\_\_\_\_ Player's League \_\_\_\_\_

Uniform Shirt Size (please indicate adult or child size) \_\_\_\_\_

Primary Phone Contacts (indicate home/cell) \_\_\_\_\_

Secondary/Emergency Contact \_\_\_\_\_

Parent/Guardian Signature/Date \_\_\_\_\_

Any conflicts (CCD, other sports – note day of week): \_\_\_\_\_