



**2008 Registration**  
**Orleans Little League Baseball Inc.**  
 P.O. Box 622, Orleans, Ontario, K1C 1S9  
 613.824.BALL  
[www.orleanslittleleague.info](http://www.orleanslittleleague.info)

<b>Registrar</b> DOB confirmed	<input type="checkbox"/>
-----	<input type="checkbox"/>

**Player Information (please print)**

<b>Last Name:</b>	<b>First Name:</b>
<b>Home Address:</b>	<b>Postal Code:</b>
<b>Home Telephone:</b>	<b>Email Address:</b>

**Date of birth (yy/mm/dd):** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ \*proof of age required; only birth certificate is accepted

Check one	Division	Age as of April 30 <sup>th</sup> , 2008	Fees - Family rate for 3 or more registered players, only 2 eldest players pay fees. Effective April 15 <sup>t</sup> , 2008, the fee when registering and paying is increased by \$20.00.
	Challenger	All ages	\$50.00 (excluded from late fee)
	Tee-Ball	5 to 6 years of age	\$105.00
	Coach Pitch	7 to 8 years of age	\$130.00
	Minor	9 to 10 years of age	\$150.00
	Major	11 to 12 years of age	\$160.00
	Junior	13 to 14 years of age	\$180.00
	Senior	15 to 16 years of age	\$205.00
	Big League	17 to 18 years of age	\$285.00

**Code of Conduct and Waiver of Liability** - refer to [www.orleanslittleleague.info](http://www.orleanslittleleague.info) for additional information

By signing this document I agree that I (if over 17) or my son/daughter (if under 18) and members of the family all agree to abide by the OLLBI Code of Conduct as a condition of participation in the OLLBI program.

**WAIVER OF LIABILITY/CORPORATE MEMBER OF OLLBI:** In signing this release, I understand my child is participating at his/her own risk and waive all claims of every nature against the organizers, directors, managers, coaches, participants and any other parties connected with the Orleans Little League Baseball Inc., singly or collectively, from and against any blame and liability, for any injury, misadventure, harm, loss, inconvenience or damage hereby suffered as result of participating in the Orleans Little League Baseball Inc.

**Parent or Guardian Information**

<b>Last Name:</b>	<b>First Name:</b>
<b>Home Address:</b>	<b>Postal Code:</b>
<b>Signature:</b>	<b>Date signed:</b>

**Volunteering with Orleans Little League Baseball Inc.**

Orleans Little League Baseball Inc. can only function at the current fee level with the generous support of volunteers who give of their time to help their children and other children in our community.

**I would like to volunteer as:**

Check preference(s)	Position	Level of certification
	Manager / Head Coach	
	Assistant Coach	
	Umpire	
	OLLBI Executive or Administration	Not applicable