



Hot Line: 248-975-8157

**WALK-IN REGISTRATION
RICHARDSON CENTER**

(Across from WL Central HS)

- Thursday, December 10, 6:30 - 9:00 p.m.
- Thursday, January 14, 6:30 - 9:00 p.m.
- Thursday, January 28, 6:30 - 9:00 p.m.
- Thursday, February 11, 6:30 - 9:00 p.m.
- Thursday, February 25, 6:30 - 9:00 p.m.

**MAIL IN REGISTRATION
LAKES ATHLETIC ASSOCIATION**

5720 Recreation Drive

West Bloomfield, MI 48324

Include: Registration, Fee, Birth Certificate

Make checks payable to LAKES ATHLETIC ASSOCIATION (LAA)

All fees are DUE IN FULL at time of registration.

\$10 late fee will be assessed on all registrations received after March 1, 2010.

No refunds after March 1, 2010

Registrations received after March 1, 2010 will be placed on a waiting list.

All returned checks are subject to a \$36 bank fee.

Colt and Palomino seasons start after high school season is complete.

COLT & PALOMINO REGISTRATION CUTOFF DATE IS APRIL 16, 2010 NO EXCEPTIONS!!!

REGISTRATION FEES

- \$70 - Shetland (T-Ball)
- \$80 - Pinto
- \$85 - Mustang
- \$90 - Bronco
- \$95 - Pony
- \$195 - Colt & Palomino

REGISTRATION DISCOUNTS

- \$5 discount if received before Jan 12
- \$10 discount on players from the same family after the first player
- Colt/ Palomino
- Fundraiser does not apply (included in fee)
- Game pants are not included

WHY SHOULD YOU CHOOSE LAKES?

- Local teams - No player draft - Equal playing time for all players
- Full uniform is supplied - Minimum 15 game season (Pinto - Pony)
- Safe equipment and fields - Tournament season available

----- DETACH AND KEEP FOR YOUR RECORDS -----

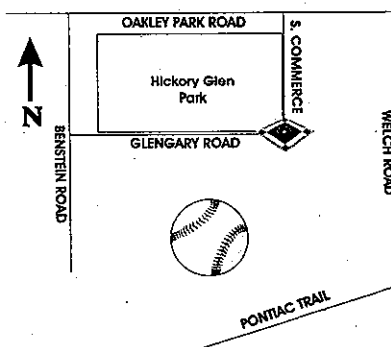
Looking for additional income?
 Become an Umpire!
 Call the Hotline today!

**LAKES ATHLETIC HOTLINE
(248) 975-8157**



www.lakesareabaseball.com

**GAMES PLAYED AT
HICKORY GLEN PARK
S. COMMERCE & GLENGARY ROADS**





2010 P.O.N.Y. Hard Pitch Baseball Registration

Date Received _____

Check # _____ Amount _____

Cash _____ Board Initial _____

Early _____ Family _____ Fundraiser _____

DATE OF BIRTH	LEAGUE DIVISIONS / DESCRIPTIONS	
5/1/03 - 4/30/06	.....Instructional/T-Ball (no playoffs)	\$70 <input type="checkbox"/>
5/1/01 - 4/30/06	.....Pinto (Coach/Player Pitch)	\$80 <input type="checkbox"/>
5/1/99 - 4/30/03	.....Mustang (Limited Stealing)	\$85 <input type="checkbox"/>
5/1/97 - 4/30/01	.....Bronco (Full Baseball/Inter-League Play)	\$90 <input type="checkbox"/>
5/1/95 - 4/30/99	.....Pony (Inter-league Play)	\$95 <input type="checkbox"/>
5/1/93 - 4/30/97	.....Colt (Citywide Competition)	\$195 <input type="checkbox"/>
5/1/90 - 4/30/95	.....Palomino (Citywide Competition)	\$195 <input type="checkbox"/>

I choose not to participate in this years Lakes sponsored Fundraiser. I am willing to waive this option and agree to an additional \$40 per player fee, payable in full at time of registration.

Guardian's Initials _____

LAA Initials _____

Name _____ Birthdate _____ / _____ / _____

Address _____ City _____ Zip _____

Major Cross Streets _____ Subdivision _____

Father _____ Phone (h) _____ (c) _____

Mother _____ Phone (h) _____ (c) _____

E-mail _____ School _____

I would like to help in the following ways: Manager _____ Coach _____ Board Member _____ Team Sponsor _____ Other _____

Is there a Manager that you do NOT want to play for? _____

Are there any medical conditions or medications affecting your child that the Manager should be aware of? _____

To the best of my knowledge, my child _____ is in adequate health to participate in the activities of the Lakes Athletic Association

I, the undersigned, authorize LAKES ATHLETIC ASSOCIATION to arrange for emergency medical treatment in my absence, that may be needed due to participation in LAKES ATHLETIC ASSOCIATION activities. I will assume full financial responsibility for emergency transportation and treatment rendered. I hereby agree to waive, release, absolve, indemnify and to hold harmless LAKES ATHLETIC ASSOCIATION, managers, coaches, umpires and Board members for any claim arising out of an injury to my son/daughter. I further agree to waive, release, absolve, indemnify, and to hold harmless any township, municipal or city authority for any claim arising out of an injury to my son/daughter during the course of league play, practice or activity on property owned by said township, municipal or city.

Signature of Parent / Guardian _____ Date _____

Players Waist (Pant) Size - Circle One							
Size	YS	YM	YL	YXL	AS	AM	AL AXL
	22	24	28	30	27	31	34 38

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COLT/PALOMINO

- Fundraiser does not apply (included in fee)

- Game pants are not included

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Important Dates for 2010

- ⊗ Registration at THE RICHARDSON CENTER 6:30 p.m. - 9:00 p.m.
- Thurs. Dec. 10, Thurs. Jan. 14, Thurs. Jan. 28, Thurs. Feb. 11, Thurs. Feb. 25
- ⊗ March 25 - Manager's meeting at THE RICHARDSON CENTER
- ⊗ April 2, 3, 4 - Equipment Distribution
- ⊗ April 17 - Field Clean up
- ⊗ April 19 - Opening Day
- ⊗ May 1 - Shetland (T-ball) season begins
- ⊗ May 2 - Picture Day @ RICHARDSON CENTER
- ⊗ June 1 - Mandatory Manager's Meeting @ RICHARDSON CENTER
- ⊗ June 7 - Colt/Palomino season begins
- ⊗ June 5 - Playoffs begin
- ⊗ June 19 - Championship Day
- ⊗ June 28 - Tournament Seasons begin

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