

MAYOR'S CUP T-BALL CLASSIC

City Hall Plaza

Saturday, April 24, 2010

8:00 a.m.—Noon

Rain Date

Sunday, April 25, 2010

2:00 p.m.—5:00 p.m.

**DO NOT RETURN TO
SCHOOLS, SEND TO
ADDRESS/FAX BELOW.**

**Boys & Girls
Ages 5-7**

Sponsored

By

Chesapeake Youth Committee (CYC)

ONE DAY EVENT



NO CHARGE

&

Office of Youth Services

REGISTRATION INFORMATION

Player: _____ Street Address: _____

Home Phone: _____ City: _____ State: _____ Zip: _____

Date of Birth: ___/___/___ Gender: _____

School: _____ Current Grade: _____

Parent/Guardian-Name: _____ Daytime Phone Number: _____

UNIFORMS:

Youth Shirt (Please circle selected shirt size)

YS YM YL YXL

PARENTAL AGREEMENT AND RELEASE:

By signing this consent, I agree to hold harmless the City of Chesapeake, Virginia, its departments, officials, employees and volunteers from and against any and all claims, including claims for personal injury, property damage, death, costs, or attorney's fees arising out of or related to my child's participation in this youth athletic program. I authorize the City of Chesapeake, Virginia and its departments to take photographs, audio and video recordings of me and/or my child at any City facility, function or park for publications used in promoting City programs.

Parent/Guardian Signature: _____ Date: _____

Space is limited. Please register by April 12, 2010.

For additional information, please contact:
Mary R. Riley
Youth Program Administrator
(757) 382-6191 Office - (757) 382-8762 Fax
mriley@cityofchesapeake.net

Mail or fax registration form to:
Office of Youth Services
City of Chesapeake
301 Albemarle Dr.
Chesapeake, Virginia 23322
FAX—382-8762

NO CHARGE

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