



Little Shooters



IMPORTANT LEAGUE INFORMATION:

- **Dates: October (Thursdays)**
10/20, 10/27, 11/3 & 11/10
(4 Sessions)
- **Time:**
Kind-2nd Grade (Beginner)
6:00pm-6:45pm
1st Grade – 3rd Grade (Advanced)
7:00pm-7:45pm
- **Cost: \$48**
- **Coach: Mike Juenger**

Please Check One for Each Category:

Session/Age:

- o 6:00pm-6:45pm (Beginner)
- o 7:00pm-7:45pm (Advanced)

PLEASE BRING YOUR OWN BALL. IF UNAVAILABLE, PLEASE MAKE ARRANGEMENTS BY CALLING OR EMAILING.

*******Held at: Belleville Sportsplex**

Player Name _____ Player Birthdate: _____ Parents Name _____
 Home Phone _____ Cell Phone _____
 Address _____ City _____ State _____ Zip _____
 Payment: Credit Card # _____ Exp Date _____ CVV _____
 E-mail _____ **Required**
 Conflicts _____

Signature _____

The undersigned hereby agrees to indemnify and hold harmless the Family Sportsplex; Belleville Sportsplex LLC of Belleville, IL from any liability for any loss, damage or injuries incurred by the undersigned or by a minor child of the undersigned as a result of the use by the undersigned or by any minor child of the undersigned of any facilities, programs, or activities owned, maintained or supervised by agents or employees of the Family Sportsplex; Belleville Sportsplex LLC Belleville, Illinois. EACH PLAYER, COACH AND MANAGER MUST COMPLETE HIS OR HER PORTION OF THE

OFFICIAL ENTRY FORM. Please PRINT complete information in the space below and have each player sign his or her name. In signing below I verify to play on the mentioned team that in consideration of you accepting this entry, I intend to be legally bound hereby for myself, my heirs, executors and administrators, waive and release any and all rights I may have against the Family Sportsplex; Belleville Sportsplex LLC of Belleville, Illinois and its representatives for any and all injuries suffered by me and the games, including, but not limited to negligence of the Family Sportsplex LLC of Belleville, Illinois. I understand and have read the facts and information for the league and hereby agree to abide by them.

Send Form to: 2346 Mascoutah Ave. Belleville, IL 62220

FOR MORE INFO: juergen@bellevillesportsplex.com

www.bellevillesportsplex.com

Invoice # _____

PYMT METHOD: _____