

Cleveland Baseball Academy
Cleveland Indoor Baseball League "CIBL"
2010 Winter
Rookie League Information 7-8 yr. Old

The *Cleveland Indoor Baseball League (CIBL)* will begin its Winter Session on Tuesday, January 5th for players 7 & 8 years old (must be of age by 10-1-09). The games will be played once a week for 6 weeks and will be played on Tuesdays, or Thursdays. A CIBL Championship game will be played to determine a league champion. Trophies will be awarded to the 1st place team. Games are 55 minutes maximum and begin after school on Tuesdays, or Thursdays.

Each team must have a head coach and 1 assistant present for each game. If you are signing up as a free agent (player without a team) an adult must be available to assist each game. Any coaching volunteers are welcome. If one person would like to manage a rookie free agent team please let us know. Maximum 12 free agents allowed in the league forming one free agent team at a time. If another free agent team is added to the league it will be done to balance the league to a higher even number of teams. Formed league teams have precedent over free agent teams when trying to get into the league. It is first come first served within 10 days of the start of a league for teams of free agents and formed league teams. In other words: If you have a complete team and have not registered your team within 10 days of the start of league play a free agent rookie team may be formed within the Cleveland Indoor Baseball League sign ups and added to the league as a team. The sign ups are obtained by the CBA through normal registration and are placed on a free agent list. The free agent player will be added to a team when he/she is next in line numerically on the free agent list. The player is placed on the list when the Cleveland Baseball Academy receives the registration form with payment. The free agent list is good for the upcoming season. If player gets shut out of the league due to maximum free agents already acquired in the league he can remain on the list maintaining his numerical status for the next season. Best form of payment for free agents is a check. All non-players or parents must sit in the bleachers or in specified viewing areas during the games.

A Cleveland Baseball Academy staff member will be coordinating and umpiring games for the day. Arguing with an umpire during a youth instructional baseball game will result in automatic ejection for player, fan or parent. Ejected party must leave the playing and viewing area for the remainder of the contest.

Team fees: \$710.00 per 12 man team. \$100.00 non-refundable deposit that will go towards your entry fee will hold your position in the league. **League fees due one week prior to your first game.**

Free agents: \$70.00 per player (FFC member). \$85.00 (Non-member).
We encourage teams instead of free agents. If a team is looking for players we will have a free agent list to help solidify a team.

Players must have the same colored T-shirts. Tennis shoes are required for coaches and players. Please no black soles worn on the field/courts.

Application: Please sign me up to play rookie Baseball in the "Cleveland Indoor Baseball League" (CIBL)

Rookie Ball Team Name _____ **Manager** _____

I am a Free Agent _____ (will be added to team) **Yes, I am placing a \$100.deposit for team** _____

Make Checks Payable to:
CBA/LNSP ATTN: CIBL _____ **EMAIL** _____

Payment: Credit Card _____ exp. Date __-__-__ visa/mc **Amount Paid \$** _____

Name _____ **D.O.B.** ____/____/____ **Age** _____

Address _____ **City** _____ **St.** _____ **Zip** _____

Father's Name _____ **Mother's Name** _____

Phone #(____) _____ **Work #**(____) _____ **Cell #**(____) _____

Parent/Guardian: I request permission for my child to participate in the Cleveland Baseball Academy Inc. I represent that my child is physically able to participate, and further acknowledge that there are certain risks of injury inherent in the participation in any sport and that such an injury may occur. I hereby release and discharge Greg Sidoris, the CBA Inc., Lost Nation Sports Park and any of its employees from any and all liability, claims, demands, causes of action, of any sort arising from injury sustained to my child consequent of his/her participation at the CBA. I understand that no refunds will be given for dates or activities that my child misses.

Parent's Signature: _____