

2018 Rising Sun Summer League



Rising Sun Summer Sports will be offering Tee Ball for players 4-6 years old, Girls softball and Boys baseball for 8U, 10U, and 12U. 15U Girls softball and Boys Babe Ruth aged baseball will be available if there are enough participants. Tee ball will be Co-Ed and all games will be played in Rising Sun. The Baseball and Softball teams will play half of their games in Rising Sun and will travel to Dearborn and Ripley counties for the other half of their games. Registration forms need to be placed in the box at the OCEMS library or the Superintendent's office by **Friday, March 2, 2018**.

Divisions: Each boy player will play in the age group that represents their age as of **May 1, 2018**; Girls will play with their respective age groups as determined by their age as of **January 1, 2018**. These dates are determined by the national sanctioning bodies of these sports. Players may request to play up 1 age group; however those decisions will be made exclusively by the league director. Criteria used to allow players to change divisions are based on league needs first and foremost and secondly on the players' ability.

There will be a formal coaches/players meeting on **Monday April 2, 2018 at 7:00pm** in the OCEMS gymnasium. At that time each player will pay her \$40 entry fee. *Note:* Parents of multiple players: each child must have separate payment. Checks should be made payable to Rising Sun Schools. **Please do not send money to school ahead of the meeting date. No late registrations will be accepted.**

Questions: Contact Tim Phelps (812) 438-2210 or at risingsunsummersports@yahoo.com



www.facebook.com/rssummersports/

Permission to Participate

Name: _____ Date of Birth: _____

GIRLS Age (as of 1/1/2018): _____ BOYS Age (as of 5/1/2018) _____

Address: _____ City: _____ State: _____

Phone: _____ Emergency Contact: _____

Shirt Size (Circle 1): YS YM YL YXL AS AM AL AXL AXXL

_____ has my permission to participate in the 2018 Rising Sun Summer Sports program. I hereby release all school authorities from liability for damages arising in connection with participation. In the event of an emergency I grant permission for my child to be transported for treatment. _____

(Signature of Parent/Guardian)

Is your child interested in playing up 1 level if possible? _____

Are you willing to coach? _____ (If so, you will be subject to a background check)

Coach Name: _____ Date of Birth: _____ Coach Shirt Size: _____