



Here is your Invitation to Play Teams from all over the World in the Birthplace of Baseball!

COOPERSTOWN ALL-STAR VILLAGE 2022 REGISTRATION FORM



1. Fill out your team information below: (Please Print Clearly)

Team Name: _____

Team Mom/ Parent : _____ E-Mail Address: _____

Team Contact: _____ Returning Team? Yes No

Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone Number: _____ Fax Number: _____

Home/Office Phone Number: _____ E-Mail Address: _____

I have read all the requirements and will comply with all CASV policies. Signature: _____

2. Please Select 3 Play Sessions (We will notify you of which session you will have) as 1st, 2nd and 3rd choices:

- | | | |
|---|---|---|
| <input type="checkbox"/> June 4 th thru June 10 th | <input type="checkbox"/> July 2 nd thru July 8 th | <input type="checkbox"/> July 30 th thru August 5 th |
| <input type="checkbox"/> June 11 th thru June 17 th | <input type="checkbox"/> July 9 th thru July 15 th | <input type="checkbox"/> August 6 th thru August 12 th |
| <input type="checkbox"/> June 18 th thru June 24 th | <input type="checkbox"/> July 16 th thru July 22 nd | <input type="checkbox"/> August 13 th thru August 19 th |
| <input type="checkbox"/> June 25 th thru July 1 st | <input type="checkbox"/> July 23 rd thru July 29 th | <input type="checkbox"/> August 20 th thru August 26 th |

3. Cooperstown All Star Village Package: All Inclusive (Subject to change) Each Team Receives: Ball Bucket and Scorebook

Cooperstown Team Package: Each player / coach receives the following: \$1,295.00

Players Receive: 2 Professional CASV Baseball Jerseys * CASV Baseball Cap * 2 Pairs of Socks * CASV Warm up Jacket * Three meals a day * Air-Conditioned Bunkhouse * Ticket to the National Baseball Hall of Fame * Induction into The Cooperstown Youth Baseball Hall of Fame * Hall of Fame Ring * Team Uniform Laundry Service (Sunday thru Wednesday) * Secondary Team Insurance * 7 Tournament Games (Depending upon Weather)

Coaches Receive: 2 CASV Polo Shirts * CASV Scout Jacket * CASV Baseball Cap * Ticket to the National Baseball Hall of Fame * Meals & Accommodations * **Hall of Fame Ring** * Laundry Service (Sunday thru Wednesday)

Team Requirement of Minimum 11 Players and 2 Coaches.

Number of Players and Coaches: _____ X \$1,295.00 Total \$ _____

One CASV approved umpire required per team (Stays free in CASV umpire's barracks)
(If you do not have a CASV Approved Umpire, please contact us)

No Umpire Fee: \$1,295.00 \$ _____

Bunkhouse Fee: (\$400 will be used as a cleaning fee and \$250 will be held for potential damage or excessive cleaning, and will be refunded after inspection and verified by director no damage has occurred) \$ 650.00

Any coach must report and damage and/or a dirty room prior to checking in the bunk by notifying the main office in writing. If you don't check out with a director before you leave, you will forfeit the \$250 deposit.

Total Amount Due: \$ _____

To ensure your Session at the Cooperstown All Star Village, we require the following:

- With Registration Form.....\$1000.00 (to hold your reservation) Confirmation will be mailed.
- November 1, 2021..... \$2000.00 2nd installment (confirms reservation) Confirmation will be mailed.
- March 1st, 2022.....Final Balance Due (guarantees reservation) Confirmation will be mailed.

Fee Schedule and Prices subject to change; All PAYMENTS ARE NONREFUNDABLE after November 1st, 2022

All Payments must be either CASHIERS CHECK, CERTIFIED CHECK or U.S MONEY ORDER ONLY!



Make Payable To:
Cooperstown All Star Village
P.O Box 670
Cooperstown, NY 13326
Fax: 607- 432-1076



Cooperstown All Star Village reserves the right at any time, to cancel a team's registration and refund all deposit(s). Additionally, failure to comply with CASV requirements, deadlines or policies may also cause cancellation of a team's registration or placement.



COOPERSTOWN ALL-STAR VILLAGE 2022 Parent Contact Player Form

Team Name (printed): _____

Coaches Name (printed): _____ Town/City (Printed): _____

State/Province: _____ Coaches Cell Phone: (_____) _____

Tournament Week (Printed): _____ (Fill out if already assigned, if not assigned CASV office will complete)

Coaches please have all your parents fill this form out, this is used for Cooperstown All Star Village's Office purpose only, this information will not be used or given out to any other companies:

Parent Name (Printed):	Parent Email Address (Printed):	Parent Emergency Contact Cell Phone Number (Printed):
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Cooperstown All Star Village requires teams to have a minimum of 11 players rostered