



## Little All Stars for Kids K-2<sup>nd</sup> Grade

Meets Wednesday's 3:35pm-4:35pm at  
Saul Mirowitz Jewish Community School.  
Fall session begins Wednesday, Aug. 24  
Ends Oct.26 (No class on 10/5)

**Total \$135 (Maximum of 8 students)**

### Introducing Your Child To America's Past Time...

Little All Stars is a leader in youth baseball and softball development. Our innovative and fun curriculum introduces boys and girls to the great games of baseball and softball, and emphasizes baseball skills, character development, teamwork and sportsmanship! We build confidence in your Little All Star.

### Little All Stars Owner: Gary Lerner

- **Saul Mirowitz Jewish Community School Athletic Dir.**
- Involved in youth baseball as either a player, umpire or coach for over 25 years
- Created an innovative idea to help children develop their skills while at the same time having a blast

### Little All Stars Instructor: JJ Lerner

- **Saul Mirowitz Jewish Community School Alumnus**
- 14 years as a player
- Recent graduate & high school star pitcher and team captain at the Whitfield School

### What we Teach at Little All Stars

Your Little All Stars learn the basics: hitting, fielding, throwing and running the bases. We stress physical activity and sportsmanship in a fun, and memorable way, while at the same time develop skills at an early age. If it rains or the weather is too cold for the outdoors, Little All Stars is prepared for that as well, with fun indoor baseball and softball activities, games and crafts.

*For more information, call Gary Lerner at Little All Stars  
Baseball and Softball at 314-517-5501, or email at  
[glstl19@gmail.com](mailto:glstl19@gmail.com)*





## Little All Stars 2022 Registration Form

(One registration form per child please)  
*Saul Mirowitz Jewish Community School*

Student's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Parent's Home Phone: \_\_\_\_\_

Parent's Cell Phone: \_\_\_\_\_

Student Left or Right Handed: \_\_\_\_\_

*Make check payable to: Little All Stars*

Mail registration form and check for \$135 to the following:

**Little All Stars**

14481 White Pine Ridge Lane  
Chesterfield, MO 63017

or

Drop off check and registration form at the school's office.

Signature of parent/guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Please contact Gary Lerner at 314-517-5501 or email at [glstl19@gmail.com](mailto:glstl19@gmail.com) with any questions you have.



**Little All Stars**  
**Parental Consent and Release of Liability**

In consideration of my minor child (the “Child”) being given the opportunity to participate in the Little All Stars baseball and softball program, camp, or course (the “Program”) being provided at Saul Mirowitz Jewish Community School (the “School”) by LAS Management, LLC d/b/a Little All Stars (“Little All Stars”), I/we hereby consent to the Child participating in the Program and hereby understand and agree, on behalf of myself/ourselves, the Child, and our respective heirs, personal representatives, successors, and assigns:

1. Assumption of Risk. I/we understand that participation in the Program, like any athletic activity, involves physical exertion and certain risks, including, but not limited to, serious injury. I/we understand that, despite the safety precautions taken by Little All Stars and its instructors, it is impossible to guarantee that the Child will not be injured. I/we hereby recognize and assume, to the fullest extent allowed by law, full responsibility and liability for any risks of loss, personal injury, or other medical conditions, whether known or unknown, that may be sustained by the Child during the Program, even if arising out of or resulting from the negligence of Little All Stars, the School, and their respective members, managers, directors, administrators, employees, and agents.
2. Release of Liability. I/we hereby waive, release, absolve, discharge, hold harmless, and covenant not to sue Little All Stars, the School, and their respective members, managers, directors, administrators, employees, and agents (the “Released Parties”) to the fullest extent allowed by law from and against any and all liability (including any and all costs and expenses), damages, claims, demands, actions, and causes of action of any nature that I/we or the Child has or may in the future have against the released parties arising out of or resulting from the Child’s participation in the Program.
3. Medical Consent. I/we warrant that the Child is in good health, and is physically, emotionally, and mentally able to participate in the Program, and I/we agree to notify Little All Stars in writing if there is a change in any of the foregoing. I/we have provided the School with emergency contact information and other pertinent health information. I/we hereby consent and authorize Little All Stars and the School to administer any general first aid treatment for any minor injuries or illnesses experienced by the Child during the Program.
4. Email Authorization. By providing my email address below, I/we authorize Little All Stars to send me/us periodic emails regarding the products and services, including discounts, offered by Little All Stars and acknowledge that I/we may opt out of the Little All Star’s email list at any time by so notifying Little All Stars.
5. Consent for Promotional Videos/Testimonials. I/we hereby give permission to Little All Stars to use the Child's name and to use, copy, display, modify and distribute the Child's photographic likeness and related audio materials in all forms and media for any lawful purpose, including the right to copy, display, distribute, and include the image(s) in other materials. I/we waive any right of inspection and approval. I/we understand that all such media shall be owned by Little All Stars.

I/we certify that I/we are the parents or legal guardians of the Child and have full power and authority to sign this Parental Consent and Release of Liability and to grant and give all consents and releases provided herein. I/we intend this Parental Consent and Release of Liability to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that, if any portion is found to be invalid or unenforceable, the balance shall continue in full force and effect. I/we have read and fully understand this Parental Consent and Release of Liability prior to signing it and understand I/we are releasing and waiving certain legal rights and remedies.

Signature of Parent or Legal Guardian                      Printed Name                      Date

Signature of Parent or Legal Guardian                      Printed Name                      Date

Name of Child    Parent or Legal Guardian’s Email Address