



## Capitol Little League Work Bond Check Return / Reimbursement Form

Thank you for your commitment to Capitol Little League! Please complete the following information to ensure the proper return of your family's \$50 Work Bond Commitment. Each Capitol Little League family is responsible for ONE Work Bond Commitment (6 Hours).

For families with more than one player, please provide the name and league age of each player.

Work Bond Commitment uncashed checks / payments will be returned by the end of the season after completing all 6 volunteer hours.

Unfulfilled Work Bond Commitment checks will be deposited in mid-July, upon completion of the District All Star Tournaments.

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Player's Name: \_\_\_\_\_ Player's League Age: \_\_\_\_\_

Player's Name: \_\_\_\_\_ Player's League Age: \_\_\_\_\_

Player's Name: \_\_\_\_\_ Player's League Age: \_\_\_\_\_

Parent/Legal Guardian/Payer Name: \_\_\_\_\_

Parent/Legal Guardian/Payer Contact Number: \_\_\_\_\_

My Family's Work Bond Commitment was provided by *cash / check* (please circle)  
to be held until fulfillment of Work Bond Commitment:

Check #: \_\_\_\_\_

(If Work Bond Commitment is not fulfilled, this check will be cashed after District All Star Tournaments.)

Please **check one** of the following two choices for your Work Bond reimbursement/donation:

1. Please destroy my check upon Work Bond Commitment fulfillment

with email confirmation:

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Email Address: \_\_\_\_\_

2. Please accept my Work Bond Commitment as a donation:

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Parent/Legal Guardian/Payer Signature: \_\_\_\_\_