



ADDISON GIRLS SPORT'S PROGRAM SOFTBALL REGISTRATION FORM

Player Information

Name: _____ Birthday _____ Grade _____
 Address: _____ Apt. _____ City: _____ Zip _____
 Phone: _____ E-mail: _____ School _____
 Player Status New Player (*Must present a birth certificate*)
 Returning Player Team: _____ Level _____

Family Information

First Name Last Name
 Mother: _____
 Father: _____

Other family members playing this year

Name	Birthday	Grade
_____	_____	_____
_____	_____	_____

I wish to volunteer as a: (*Circle one*)

Manager Coach Sponsor Team Mom/Dad

Equipment Information

Previous Year (*If New Player or change from previous year, please circle appropriate size(s).*)

Shirt Size: _____ YS YM YL YXL AS AM AL AXL AXXL
 Pant Size: _____ YS YM YL YXL AS AM AL AXL AXXL

Medical Information

Physician: _____ Phone: _____

Financial Information

Softball Fee Schedule			
SR. (14 & Under)	75	65	0
JR. (12 & Under)	75	65	0
Pony (10 & Under)	75	65	0
T-Pitch (6 & 7 Yrs)	45	35	0

League: _____

Candy Buyout: (*Softball Only*) _____

Registration Fee Paid: (\$) _____

Check #: _____

Waiver

I / We the parents of the above named girl hereby give my / our approval to her participation in any activities of the Addison Girls Sports Program during the current season. I / We assume risks incidental to the conduct of these activities and transportation to and from the activities. I / We do further release, absolve from indemnity and hold blameless the Addison Girls Sports Program Inc., the organizers, the sponsors, or any supervisors appointed by them. I / We likewise release from responsibility any person transporting my/our daughter to or from the activities. I / We will furnish a birth certificate for the above player upon league request of the League Officials.

Parent/Guardian Signature _____

Date: _____

Parent/Guardian Signature _____

Date: _____