

Wakefield Girls Softball Spring League Registration Form

Participant's Name: _____

Birth date: ____/____/____ Age: _____ Grade: _____

Address: _____ Town: _____ Zip: _____

Mailing Address (if different than above): _____

EMAIL ADDRESS: _____

This will be used to send out game notices and other important league information.

Division (check one)

- 10U*** (9, 10 & 11 Year olds) - \$40.00**
- 12U*** (11, 12 & 13 Year olds) - \$40.00**
- 14U/16U*** (13, 14, 15 & 16 Year olds) - \$60.00**

- The specific age group you will play in is based on your age on January 1, 2015. Any requests to play in a younger age group must be approved by the league. If it is desired to move up to an older age group, we recommended this be discussed with the league or with a coach to ensure proper placement
- In addition to your registration fee, you will be given 5 calendars that you can sell for \$5.00 each (or turn them in yourself) to be entered in a daily raffle for the month of June. Please return the money to Wakefield Rec.

Uniform Size

SHIRT: (circle one) Youth or Adult

SMALL MEDIUM LARGE XLARGE XXLARGE

PANTS: (circle one) Youth or Adult

SMALL MEDIUM LARGE XLARGE XXLARGE

*** If you have played before and have pants from previous years(s) please bring them back when you sign-up. You will receive another pair when uniforms are handed out later. This helps keep league costs down.

TEAM AND/OR COACH YOU PLAYED FOR LAST YEAR: _____

PLEASE LIST TWO EMERGENCY CONTACTS INFORMATION.

(1) Parent/Guardian, First and Last Name:

Home # _____

Cell #: _____

(2) Second Person, First and Last Name:

Home# _____

Cell #: _____

State relationship to athlete: _____
(i.e. grandparent, neighbor, etc.)

Allergies (i.e. bee stings): yes ___ no ___ To What? _____

Allergies to medications: yes ___ no ___ To What? _____

List Medical Conditions (i.e., wears contact lenses, glasses, braces, etc.)

If I cannot be reached in an emergency, I hereby consent for a qualified physician or surgeon to examine, diagnose and to prescribe or perform treatment, including surgery that is deemed advisable for the welfare of the above-named participant. I further understand all risks to my child while involved in activities and I will not hold Wakefield Parks & Recreation or its agents responsible for any possible injury resulting during an activity.

I understand this informed consent from and agree to its conditions on behalf of my child/self:

Parent/Guardian/Self Signature

Date

VOLUNTEERS NEEDED (please circle below)

Coach Assistant Coach Team Parent
Concession Stand Umpires Field Maintenance

Wakefield Girls Softball is a 100% Volunteer Effort

The Quality of Wakefield Girls Softball comes directly from the families.

In order to have a successful program, we depend on the program participants and family members to volunteer their time (or provide a donation in lieu of volunteering). As such, there are two options,

PLEASE CIRCLE ONE OF THE CHOICES BELOW:

Volunteer Option

This option requires:

- Volunteering for 2 functions per family (i.e., field Spring or Fall clean-up, concession,
- Working the Slammers Classic or ASA State tournaments, fundraising event such as a Tag day, carwash, etc.)
- A donation of a case of soda or Gatorade product (the specified kind and amount will be announced by the Coach)

“In Lieu of” Volunteering Option:

This option requires:

A **\$75.00** donation to Rochester Girls Softball in lieu of volunteering/fundraising
The donation is due at the time of registration.