

Classie Lassie Registration Form

(http://www.classieclassies.net)

Name _____

Date of Birth _____

Mailing Address _____

Age (as of this past January 1st) _____

City _____ Zip _____

Age Group: 5-6 7-8

School _____ Grade _____

Placement Request (another player's Name)

We will try to Honor at least one choice

Primary Phone _____

- Home
 Work
 Cell

1st Choice: _____

Additional Phone _____

- Home
 Work
 Cell

2nd Choice: _____

Additional Phone _____

- Home
 Work
 Cell

other choices _____

E-Mail Address _____ (please print clearly)

Additional E-Mail addresses _____

Experience and Ability

of Years Playing: Organized Ball _____

T-Shirt Size: Children Sizes: **6/8 10/12 14/16** Adult Sizes: **SM MED LGE XLGE**

Emergency Contact Name _____ Phone _____

Does player have any physical impairment or medical problem? _____, Describe _____

Parents Name Mother _____ Father _____

Are You Interested in:

Managing: **Y N** Name _____ Sponsoring a Team: **Y N**

Coaching: **Y N** Name _____ Purchasing a Sign: **Y N**

I do hereby give my daughter, _____, permission to participate in the Classie Lassie Softball Program during this years' season. I will assume all risks and hazards that are incidental to the conduct of the activities. I further agree to release, absolve, indemnify and hold harmless, the CLASSIE LASSIE SOFTBALL LEAGUE, their sponsors, organizers, supervisors, board members and officers of all legal responsibilities. I give permission to this league, its officers or representatives to provide medical treatment in case of emergency or injury. I also understand that the registration fee is non-refundable.

Signature (Parent/Guardian) _____ Date _____

League Use Only

Registration Total: _____ No. Registered: _____

Amount Paid: _____ (Check, Cash) Check No.: _____

Amount Owed: _____ Late Fee: _____ League Official: _____