

Classie Lassie 2010 FALL BALL Registration Form

(<http://www.classielassies.net>)

Name _____

Date of Birth _____

Mailing Address _____

Age (as of **January 1, 2011**) _____

City _____ Zip _____

Age Group: 9-10 11-12 13-14

School _____ Grade _____

Placement Requests (another player's Name)

Used only as a Guide – **No Guarantees**

Primary Phone _____

- Home
 Work
 Cell

Additional Phone _____

- Home
 Work
 Cell

E-Mail Address _____ (please print clearly)

Pitching Interest: **Y N**

Catching Interest: **Y N**

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

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

Parents Name Mother _____ Father _____

Are You Interested in:

Managing: **Y N** Name _____ Coaching: **Y N** Name _____

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.: _____ League Official: _____