

GRAFTON GIRLS SOFTBALL, INC.	Registration Form - 2012 Spring Recreation Season
	Registration Deadline - February 28, 2012

Section 1	PLAYER AND FAMILY INFORMATION	Please complete 1 form per player
Player	First Name _____ Last Name _____ Address _____ City _____ State _____ Zip _____ Grade _____ Date of Birth _____ / _____ / _____ Did your child play in our league last year? _____ <small>month / day / year</small> Yes - or - No	
Primary Contact	First Name _____ Last Name _____ Home Phone _____ Cell Phone _____ Relationship to player _____ Email Address _____ <i>(For League Use Only)</i>	
Secondary Contact	First Name _____ Last Name _____ Home Phone _____ Cell Phone _____ Relationship to player _____ Email Address _____ <i>(For League Use Only)</i>	

Section 2	VOLUNTEERING	We need your help!												
<p>Grafton Girls Softball is run entirely by volunteers. It takes the combined efforts of everyone in our league to make Grafton Girls Softball a success for our children. In addition to sponsors and coaches, we need volunteers to assist with Opening Day, Pitch, Hit & Run, Awards Night, game-night concession shifts, field maintenance and much more. During the 2012 season, we will make you aware of volunteer opportunities through communications from your coach and league wide emails. We hope that every family will find a way to contribute to another successful season</p>														
<table style="width:100%; border:none;"> <tr> <td style="width:15%;"><u>Primary Contact</u></td> <td style="width:15%;"><u>Secondary Contact</u></td> <td style="width:30%;"><u>Volunteer Activity</u></td> <td style="width:20%;"><u>Date of Birth</u></td> </tr> <tr> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td>Head Coach</td> <td>_____ / _____ / _____ <small>month / day / year</small></td> </tr> <tr> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td>Assistant Coach</td> <td>_____ / _____ / _____ <small>month / day / year</small></td> </tr> </table> <p style="text-align:center;"><i>Please note: For CORI and insurance purposes it is necessary for obtain the date of birth for all coaches.</i></p>			<u>Primary Contact</u>	<u>Secondary Contact</u>	<u>Volunteer Activity</u>	<u>Date of Birth</u>	<input type="checkbox"/>	<input type="checkbox"/>	Head Coach	_____ / _____ / _____ <small>month / day / year</small>	<input type="checkbox"/>	<input type="checkbox"/>	Assistant Coach	_____ / _____ / _____ <small>month / day / year</small>
<u>Primary Contact</u>	<u>Secondary Contact</u>	<u>Volunteer Activity</u>	<u>Date of Birth</u>											
<input type="checkbox"/>	<input type="checkbox"/>	Head Coach	_____ / _____ / _____ <small>month / day / year</small>											
<input type="checkbox"/>	<input type="checkbox"/>	Assistant Coach	_____ / _____ / _____ <small>month / day / year</small>											

Section 3	REGISTRATION FEES	\$60.00 per player, \$120.00 per family maximum
<input type="checkbox"/> Single Player = \$60.00 <input type="checkbox"/> Two or More Players = \$120.00 <input type="checkbox"/> Scholarship Requested		

Section 4	PARENTAL AUTHORIZATION	Please review, sign, and date below
<p>I, parent or guardian of the above named candidate for a position in Grafton Girls Softball, Inc., hereby give approval to her participation in any and all league activities during the current season. I assume all risk and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless the parent or local league organization, the organizers, sponsors, supervisors, participants, and persons transporting the girl to and from activities, for any claim arising out of an injury to the girl, except to the extent and in the amount covered by accident and/or liability insurance held by the league.</p> <p>I also grant permission to managing personnel or other league representative to authorize and obtain medical care from any licensed physician, hospital, or medical clinic should the girl become ill or injured while participating in league activities away from home, or at other times when neither parent is available to grant authorization for emergency treatment.</p> <p>I agree to return upon request the uniform and other equipment issued to the girl in as good a condition as when received, except for normal wear and tear.</p> <p>I give permission to use my Daughter's picture and name on the GGSA website and in the local media.</p>		
_____ Parent or Guardian's signature Relationship to player _____ / _____ / _____ <small>month / day / year</small>		

Complete Sections 1, 2, 3, and 4 above and Mail Completed Form with Payment To:
Grafton Girls Softball, P.O. Box 80, Grafton, MA 01519