

Redding Girls Softball League Registration Form (Spring 2012 Season)

<p>Instructions:</p> <ol style="list-style-type: none"> 1. Fill out registration form completely. 2. Include full amount of registration fees. 3. Return to: City of Redding Recreation, 1250 Parkview Ave., Redding, CA 96001 	<p style="text-align: center;"><u>For Office Use:</u></p> <p>Cash Amt. Pd. _____</p> <p>Check # _____</p> <p>Prepared by _____</p> <p>Date _____</p>
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Player Name: _____ Email: _____

Phone #1: _____ Phone #2: _____

Street: _____ City: _____ Zip: _____

Age as of January 1, 2012: _____ yrs. old Birth date: _____ Grade: _____

Softball Experience: _____ yrs- Little Ladies _____ yrs- Rookies _____ yrs- Mini Minors
_____ yrs- Minors _____ yrs- Majors _____ other

Positions Played: _____

Ever played on an All-Star team? _____ yes _____ no If yes, number of years? _____

School player is attending: _____

Division to play:

_____ Little Ladies (K-6yrs) _____ Rookies (7-8yrs) _____ Mini-Minors (9-10yrs)
_____ Minors (11-12yrs) _____ Majors (13-16yrs)

T-Shirt Size: _____ Youth Sm. _____ Youth Med. _____ Youth Large
_____ Adult Sm. _____ Adult Med. _____ Adult Large _____ Adult XL

The success of this sports program depends upon volunteers. Without dedicated, enthusiastic and hard working volunteers this league could not exist. Please review the following list and select one or more areas where you can help.

_____ Team Manager	_____ Sponsor	_____ Field Maintenance
_____ Coach	_____ Scorekeeper	_____ Other _____
_____ Team Parent	_____ Umpire	_____ Any As Needed

Parent(s)/Guardian(s) Name: _____

I acknowledge that the City of Redding provides no medical coverage for any accidents or injury resulting from this program. I acknowledge that I have read the refund policy.

Parent or Guardian Name (Signature)

Date