



Warren Township Girls Softball 2012 Registration Form

Car Pool Requests (Granted where possible, only if League competitive balance can be maintained) List 2 Names Max!

Player Information

First Name	Last Name	Birth Date: ____/____/____
Current School: _____		
Current Grade (Circle 1):	1st 2nd 3rd 4th 5th 6th 7th 8th Fr So	
Home Street Address	City	Zip
		Township
Did you play in 2011? (Select One)	How many years played organized Softball/Baseball?	
<input type="radio"/> WTGS <input type="radio"/> Other Program <input type="radio"/> Did Not Play in 2011	Years in WTGS Program _____ Total # Years Playing _____	

Parent/Emergency Contact Information

FATHER/LEGAL GUARDIAN		MOTHER/LEGAL GUARDIAN	
Work Phone _____		Work Phone _____	
Home Ph ()	Cell Ph ()	Home Ph ()	Cell Ph ()
Email Address _____		Email Address _____	

Emergency Contact: (In cases of emergency we will first try to contact parents using above information)

First/Last Name: _____ Relationship to Child: _____ Phone #: _____

How did you hear about Warren Township Girls Softball? (Check All that apply)

Played in WTGS (2011 or Before) School Flyer/Info Family/Friends Website
 Newspaper Township Advert. Forwarded WTGS Emails Other _____

**BUSINESS SPONSORSHIP OPPORTUNITY
SPONSORS NEEDED!**
(Benefits Include Company Name on Jerseys)

My business is interested in sponsoring my child's team and WTGS - Please contact us:
 Business Name _____ Contact Name _____
 Phone# _____ Email Address _____

Volunteer Requirement

AT LEAST ONE OF THE FOLLOWING MUST BE SELECTED TO FULFILL THE VOLUNTEER REQUIREMENT

Head Coach-Circle Parent coaching Dad Mom

Ass't Coach-Circle Parent coaching Dad Mom Both

I volunteered to coach on another daughter's Registr. Form

Concessions-Circle Parent Volunteer Dad Mom Both
 (One 3-hour time slot /child registered; Max - 2 time slots)

Volunteer Buyout Fee = \$100/Child (Max - 2 Fees per family)

Coaching Volunteers - Circle shirt size for Parent(s) Coaching

Dad M L XL XXL
 Mom M L XL XXL

FEES - TWO CHECKS ARE DUE AT REGISTRATION (Make Checks Payable to "WTGS")

PAYMENT #1	Remitted directly to Warren Township by WTGS	\$ 15
Activity Fee		
League Fee	(1st/2nd Graders) - \$70 3rd & Up - \$90	\$
Total Fees (Either \$85 or \$105)		\$

PAYMENT #2 (Check)

Volunteer Deposit/Fee \$ 100

Check will be destroyed if/when the coaching or concessions volunteer requirement has been fulfilled. (Max 2 Vol. checks/family)

Admin Use Only	Lg Fees Check #	Vol Check#
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Child's Name _____

Medical Authorization and Information

In the event of serious accident or illness, it is the policy of Warren Township Girls Softball (WTGS) to: 1) contact the Emergency Dispatch (911) to perform first aid and when necessary recommend transport of the victim to the hospital and 2) contact the parent or guardian as soon as the situation allows. Persons desiring a different procedure must notify WTGS in writing at the time of registration.

I (we), the undersigned parent(s) of the above named participant in Warren Township Girls Softball (WTGS), do hereby authorize the coaches, assistant coaches, and/or WTGS Board Members to act as Agents for me (us) and to consent to any necessary medical treatment in my (our) absence. In case of an emergency, I/we hereby authorize emergency treatment and/or care of the above named child at any hospital. If there is an emergency and I/we cannot be reached, please contact the emergency contact provided on this 2011 Registration Form. I (We) further grant permission to coach(es) and/or Board Members to provide any needed emergency treatment prior to my (our) child's admission to medical facilities. We offer the following medical information:

Physician _____ Phone Number _____ Hospital _____

Special Medical Conditions (Please List) _____

 Father/Guardian Signature

 Date

 Mother/Guardian Signature

 Date

Uniform/Equipment and Safety Acknowledgement

I (We) understand that our child must abide by all of the WTGS uniform, equipment, safety, and game rules applicable to each division. (These rules are available on the WTGS website) Compliance with these rules is critical to learning the game in a fun and safe manner.

Volunteer Policy Acknowledgement

I (We) understand acknowledge receipt of the WTGS Volunteer Policy and will abide by its provisions.

Codes of Conduct & Background Check Forms Acknowledgement

I (We) understand that we must separately sign the *PARENT'S CODES OF CONDUCT ACKNOWLEDGEMENT* and, additionally, if volunteering as a coach, a *Background Check Authorization Form*.

Acknowledgment of Entire Registration Form - Signatures

In consideration of participation in the activities of the Warren Township Girls Softball League, I (We) do hereby fully release, indemnify, discharge, save and hold harmless the League, Board of Directors, Coaches, Umpires, and other players, and their successors, from any and all liability for damages of any nature whatsoever, and any and all known and unknown personal injuries, sickness, illness or disorder, which I (we) or any person participating with my consent may now or hereafter have arising out of or connected with participation in any activities whatsoever of the said League.

I (We) further state that I (we) have carefully read and accurately completed the *2011 Registration Form* (including the above acknowledgements) and know the contents thereof, and sign the same as my (our) own free act and deed.

 Father/Guardian Signature

 Date

 Mother/Guardian Signature

 Date