Tooele Girls Softball Players Registration Form

5/6 Year Olds

Fee \$50.00

Player's Name						
	(Please Print)					
Date of Bi	rth		Aį	ge on 01-01-201	7	
,	fyou wish to advance your dau	ahter to an older age grou	up. vou mav be requeste	ed to coach or help coach h	ner team.	
-		g.v.o, to an other age great	- A Tourney - Court			
Address			City			
Player's Phone #						
Parent's Name						
Parent's Phone #			Eme	ergency#		
Email		se Print)				
	(Pica:	se Printj				
School attended	· (Plea	Ori-Al			·	
	· (Pica	se Print)				
<u>Please</u> be a Volunt	eer: Name	<u>.</u>		Phone#		
Are you interested in	coaching?				•	
	0455	NTO DIFACE	DEAD OAD	FEDILO	•	
	STATEMENT cknowledge that participation in		EEMENT AND CON	ISENT TO PLAY: al injury to me and/or my ch		
	S activities and give consent arnor it's employees, all sponsors,				nd knowingly release, waive, and and all liability that may result	
hereby authorize TGS,	tion in the Tooele Girls Softball it's officers or representatives to	act on my behalf in accor				
disclosures and I agree t		ere from. By signing this a	greement, I acknowledg	e that I have read and unde	erstand it's contents and	
` '	an(s) Name Printed Irdian(s) Signature				,	
Number of years played		Mark the appropriate size for t-shirt below				
	Youth S	Youth M	Youth L	Youth XL		
	Adult S	Adult M	Adult L	Adult XL	Adult 2XL	
	<u>If a w</u>	ong size is ordered you n	vill be charged an addit	ional \$15.00 to cover the c	cost of a new T-shirt	
***Any concerns w	e need to be aware of? is	e: allergies, etc				

There will be a 35.00 fee on all returned checks

Refunds will be prorated after March 28th and No refunds after April 23rd