



Cabot Softball Association 2012 Spring Registration



Rose Easter---743-9704 We offer a \$5.00 sibling discount. **BIRTH CERTIFICATE MUST BE PROVIDED**

Registration ends Feb. 18, 2012 FEE IS \$65.00. There will be a \$10.00 late fee added after this date.

Web site is: cabotsoftball.com or "Like" us on Facebook for any and all upcoming information

Please print

Players Name _____ Birthdate _____ Age as of 12-31-2011 _____

Parents' or Legal Guardians' Names _____

Address _____ City _____ Zip Code _____

Home # _____ Cell # _____ Work # _____

EMAIL ADDRESS: _____

Emergency Contact Name & Number _____

All new players or players NOT returning to their Spring 2011 team must enter the draft:

If you are returning to the same team enter coaches name/team name: _____

_____ 6u Coach Pitch (*Birth Years of '05 & '06*)

_____ 12u Fast Pitch (*Birth Years of '00 & '99*)

_____ 8u Machine Pitch (*Birth Years of '04 & '03*)

_____ 14u Fast Pitch (*Birth Years of '98 & '97*)

_____ 10u Machine Pitch (*Birth Years of '02 & '01*)

_____ 16u Fast Pitch (*Birth Years of '96 & '95*)

If not enough players to separate the 14's & 16's into separate teams they may be combined together to for a 14/16 team & be listed as an official 16u team

_____ 10u Fast Pitch (*Birth Years of '02 & '01*)

****If you choose 10u Fast Pitch and we do not have enough interest for a team do you want to go to Machine Pitch _____ or a refund _____**

WHAT TO EXPECT: PRACTICES WILL START AROUND THE FIRST WEEK OF MARCH & DEPENDING ON THE COACH HE/SHE MAY PRACTICE 3 FROM 1-3 TIMES A WEEK. LEAGUE GAMES WILL START MID-APRIL TO THE END OF JUNE. EACH PLAYER MUST HAVE THERE OWN BATTING HELMET & GLOVE. CLEATS ARE OPTIONAL FOR 6u, BUT IS STRONGLY SUGGESTED FOR OTHER AGE GROUPS.

Coaches needed!!! Potential coaches should be available at least four hours a week and attend two mandatory meetings. If you would like information about coaching please contact Rose Easter @(501) 743-9704. If interested please check here _____

Tournament Teams:

The Cabot Softball Association, as well as surrounding towns and parks, regularly host weekend tournaments. These are outside the scope of league play. You and your coaches have the option to play in these if you like. If you are specifically looking to place your daughter on a competitive travel team, we will pass your name along to Cabot coaches that are looking for players. These coaches hold their own tryouts.

PLEASE READ THE FOLLOWING AND SIGN BELOW:

We understand that this program is administered by the **VOLUNTEERS** of the Cabot Softball Association, Inc. (**CSA**) by way of OFFICERS, the EXECUTIVE BOARD, and a Coach representing each age group. Secondary ACCIDENT INSURANCE will be provided for each PLAYER and COACH through our program while participating in practices and games. I, the PARENT/GUARDIAN of the registrant for this softball program, hereby release, discharge and /or otherwise indemnify the CSA and its affiliated organization and sponsors against any claim by or on the behalf of the registrant as a result of the registrant's participation in the program and/or being transported to or from the same, which transportation I hereby authorize. As the PARENT / GUARDIAN of the above named player, I hereby give consent for emergency medical care prescribed by a duly licensed DOCTOR of MEDICINE or DOCTOR of DENTISTRY. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent.

Signature of Parent/Legal Guardian _____ DATE _____

RECEIPT # _____ AMOUNT _____ SIBLING DISCOUNT APPLIED _____

NAME ON CHECK _____ CHECK # _____ CASH _____