



**COBOURG JR. ANGELS
GIRLS' SOFTBALL ASSOCIATION
www.cobourngangels.ca**

2018 Registration

Early	Deadline February 21st	-	\$90
Regular	March 5 & 7	-	\$110
Late	After May 1st	-	+\$10
Rep Fee	- May 1st	-	\$ 100

Fundraising Fee - \$60

Player Name _____ DOB M ____ / D ____ / Y _____

Address _____ Phone Number (____) _____

Email Address _____ Alternate Number (____) _____

Email Address _____ Alternate Number (____) _____

Parents/Guardians _____ # of years played _____

Allergies/ Health Concerns _____

- Age Group Coach Pitch _____ (2010-2012)
 U10 Mite _____ (2008-2009)
 U12 Squirt _____ (2006-2007)
 U14 Novice _____ (2004-2005)
 U16 Bantam _____ (2002-2003)
 U19 Midget _____ (1999-2001)

Interested in trying out for Rep? (Y/N) _____

Interested in Volunteering (Please circle) – Coach, Assistant Coach, Team Manager, Umpire, Scorekeeper, Tournaments

Parents/Guardians please initial the following:

I hereby **give** permission for my child to receive medical attention in case of an emergency. _____

I hereby **give** permission for my child's name/photo to be in newspaper/ website etc. _____

I **do not** give permission for my child's name/photo to be in newspaper/website etc. _____

I have read and understand the information "Respect My Game. A Guide for Parents" provided by Softball Ontario _____

Signature of Parent _____ Date _____

ETransfer – cobourngangels@gmail.com- Password: Angels2018 Please email completed form.

For office use only

Payment received – House league	Cash	Cheque	Postdate _____	Date _____
Rep fee	Cash	Cheque	Postdate _____	Date _____
Fundraising Fee	Cash	Cheque	Postdate _____	Date _____