

S.E.G.S.L.4481 Shirley Dr., South Euclid, OH 44121
Phone: 216-297-0636 Website: www.segsl.org

South Euclid Girls Softball League 2008 Registration

ONLY ONE REGISTRATION PER CHILD PER LEAUGE

Player's Name (last) _____ (first) _____

Parent/Guardian's Name _____

Address _____ City _____ Zip-Code _____

Phone Number _____ E-mail Address _____

T-Shirt Size (Youth M, L +Adult S, M, L,XL) _____ Birthdate _____ Age _____

School Attending Now _____ Played in 2007? Yes ___ No ___

2007 Team _____ Coach _____

Slow Pitch _____ (all leagues) Jr. Fast Pitch _____ (11-12) *Sr. Fast Pitch (13-14) _____

Would you like to umpire (must be 15 or older) _____

****A background check will be conducted for all new managers/coaches.

_____ ***I would like to coach/manage a team.

_____ I would like to sponsor this team.

League is determined by player's age on Sept. 30th, 2008.

Slow & Modified Pitch Leagues: Fast Pitch Leagues:

Pixies 6-8 yrs. ----SIGN UP WITH A FRIEND

Jr. Pigtail's (Modified Pitch) 9-10 yrs. Jr. Fast Pitch 11-12 yrs.

Sr. Pigtail 11-13 yrs. Sr. Fast Pitch 13-14 yrs.

Ponytail 14-18 yrs. ----SIGN UP WITH A FRIEND

(League divisions are subject to change)

Please enclose a check for:

\$45 per slow pitch player

\$60 per fast pitch player

(\$5 discount on each additional player in the family)

****An additional non-residency fee \$10 first child \$5 each additional child per family**

I, the parent/guardian of the above named player, who is a candidate for a position on a South Euclid Softball League team, hereby give my approval for her participation in any and all of the activities of the League during the next season. I assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities; I do hereby release, absolve, indemnify and hold harmless the South Euclid Softball League, the organizers, sponsors and the supervisors, any or all of them, in case of injury to my child. I hereby waive all claims against the organizers, the sponsors or any of the supervisors appointed by them. I likewise release from responsibility any person transporting my child to or from activities. I will furnish a birth certificate of the above named candidate upon request of league officials.

Parent's/Guardian's Signature _____ Date _____

Mail registration postmarked by 3/6/07 to avoid a mandatory late fee.

(Players must have played South Euclid Girls Softball last year to mail in registration. All new players, including siblings, must walk in, please bring proof of residency and a birth certificate for your child).

Send your check to 4481 Shirley Dr., South Euclid, OH, 44121 made out to S.E.G.S.L.