Carpinteria Valley Girls Softball League
2017 Registration Release Form

Player Information (Please Print):   ☐ Returning Player ☐ New Player

First Name: _____   Last Name: _____   Date Of Birth: _____

Address: _____   City: _____   State: _____   Zip: _____

Parent/Guardian: _____   Phone Number: _____   Home | Cell
Parent/Guardian: _____   Phone Number: _____   Home | Cell
Email Address: _____   Email Address: _____

Does Your Daughter Participate in other activities? ☐ Yes ☐ No **Day/Time:** ☐ **M:** ____ ☐ **T:** ____ ☐ **W:** ____ ☐ **TH:** ____ ☐ **F:** ____

Medical Authorization:

As the parent/guardian of the above named player, I hereby give my authorization for participation in all CVGSL activities, including transportation to and from the activities. I understand that participation in the sport of softball may result in serious injuries and that protective equipment does not prevent all injuries to players. I do hereby release, absolve, indemnify and agree to hold harmless CVGSL, the organizers, sponsors, participants, and persons transporting my child to and from activities from any claim arising out of any injury to my child whether the result of negligence or for any other cause, except to the extent and the amount covered by accident or liability insurance. If the need should arise, I give CVGSL and its agent's permission to seek medical/emergency treatment for my child.

Physician: _____   Phone: _____   ID/Plan No: _____

Insurance Company: _____   Name of Insurer: _____

Allergies or Needs: _____

Emergency Contact (Relative or Friend):

Name: _____   Relationship: _____   Phone: _____
Name: _____   Relationship: _____   Phone: _____

Volunteer Sign Up:

CVGSL is a volunteer organization and your time is needed. Please choose at least **ONE** area below in which you can be of assistance.

☐ **Beach Classic Tournament**   ☐ **Coach/Manager**   ☐ **Assistant Coach**   ☐ **CVGSL Board Member**

☐ **Field Crew**   ☐ **Scoreboard/Scorekeeper**   ☐ **Snack Shack**   ☐ **Team Parent**

Uniform Shirt Sizes:

Youth Sizes:	**Adult Sizes:**
☐ **Small**	☐ **Small**
☐ **Medium**	☐ **Medium**
☐ **Large**	☐ **Large**
☐ **Extra Large**	☐ **Extra Large**

Photo Release:

Does CVGSL have your parental consent to post your child's photo on the CVGSL website? _____ **Yes** _____ **No (Initial One)**

Registration Fee:

Registration fee on or before December 31, 2015 is $85*. Registration fee after January 1, 2016 is $150*.   Please make checks payable to CVGSL.
*Returning players referring new players: both get ½ price registration discount.

My signature acknowledges that I have completed and read this entire document.

_____   _____
Parent/Guardian Signature   **Date:**

For CVGSL Use Only	Ticket Number: _____
Registration Fee: _____	**Check No.:** _____ **Division/Age:** _____
Opt-Out Fee: _____	**Cash Receipt:** _____ **Checked By:** _____