

2010 Doniphan Softball Player Information

NAME: _____ SEX: _____ BIRTH DATE: _____ AGE NOW: _____

GRADE 2009-2010: _____ PARENTS/GUARDIANS NAMES: _____

ADDRESS: _____ CITY: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE #1 _____

#2 _____

***EMAIL ADDRESS VERY IMPORTANT TO COMMUNICATE CANCELLATIONS, CHANGES, ETC.

***EMAIL ADDRESS _____

Brothers and sisters playing summer ball (name & age)

ELIGIBILITY:

9 and Under: 7 to 9 years old as of December 31, 2009

12 and Under: 12 years old and under as of December 31, 2009

14 and Under: 14 years old and under as of December 31, 2009

18 and Under: 18 years old and under as of December 31, 2009

REGISTRATION FEES

Softball is \$35.00 per child (This includes a uniform shirt). **There is a \$10.00 late fee after March 1st.**

Please make checks payable to the Village of Doniphan.

COACHING

The summer ball program would not be possible without people who are willing to volunteer their time to coach the teams.

_____ I would be interested in being the head coach Name _____ Sex _____

_____ I would be interested in being an assistant coach Name _____ Sex _____

AGE DIVISION WILLING TO COACH _____ COACH SHIRT SIZE ADULT: S ___ M ___ L ___ XL ___ XXL _____

UNIFORMS

A SHIRT THAT THE PLAYER MAY KEEP WILL BE PROVIDED. Each player will be responsible for their own pants. Please provide an accurate shirt size, as extras will not be available.

Shirt Size: YOUTH XS S M L ADULT S M L XL XXL

UMPIRES

Please list anyone who may be interested in umpiring, must be 15 years of age. _____

Liability Waiver

In consideration of this application, I hereby for myself, my heirs, my executors and administrators, waive and release any and all rights and claims for damages from death, personal injury or property damage which I may have against the promoters, sponsors, the officials, the Village of Doniphan, and any other entity and their respective agents and employees in connection with this league. I understand that serious accidents occasionally occur during such athletic activities and hereby agree to assume those risks in consideration of being allowed to participate in the athletic activity.

Parent/ Guardian Signature _____ Date: _____

Please return completed forms and fees to: Village of Doniphan, PO BOX 189, Doniphan, NE 68832

NO Coach or team requests will be accepted/ we will try to keep teams together from year to year but if there is a problem with a coach please call Heather Pusek 402-853-1516 or email me at hpusek@kdsi.net. Every kid deserves a chance to be a part of a team. If you would like to make a donation to the youth baseball /softball association of Doniphan please let me know. Thank you Heather Pusek
Recreation Director