



OPTIMIST CLUB of WINTER PARK, INC.
WLMINGTON, NORTH CAROLINA

2009

REGISTRATION FORM FEE \$70.00 (Wee ball \$40.00)

TO: BOARD OF DIRECTORS, OPTIMIST CLUB of WINTER PARK, INC.

NUMBER: _____

PARENTS COMPLETE THE AREA BELOW

PLAYER: LAST: _____ FIRST: _____ MI: _____ BIRTH DATE: ____/____/____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

NICKNAME: _____ PHONE: _____ EMAIL: _____ @ _____

SCHOOL ATTENDING: _____

FATHER'S NAME: _____ EMPLOYED BY: _____ WORK PHONE #: _____

MOTHER'S NAME: _____ EMPLOYED BY: _____ WORK PHONE #: _____

WILL THIS CHILD PLAY ANOTHER SPORT IN MAY OR JUNE? NO _____ YES _____ (If Yes, what sport?) _____

Do you have a brother or sister participating in the program? NO [] YES [] (if yes) Last Name: _____ First Name: _____

SHIRT SIZE (Circle one): YS - YM - YL - AS - AM - AL - AXL - AXXL

PANTS SIZE (Circle one): XYS - YS - YM - YL - AS - AM - AL - AXL - AXXL

I, the parent or guardian of the registrant above, do hereby give my consent and approval to his/her participation in all Baseball/Softball and associated activities during the current season and any subsequent season he/she is eligible to participate. I assume all risk incidental to the conduct of the activities and transportation to and from the activities; and do further release, absolve, indemnify and hold harmless the Optimist Club of Winter Park, Inc., the organizers, sponsors, and the supervisors, and or all of them. I likewise release from responsibility any person transporting my son/daughter to or from the activities. In case of injury to my child, I hereby wave all claims against the organizers, the sponsors, or any of the supervisors appointed by them. By signing this instrument I agree I have read and understood the above statement.

PARENT OR GUARDIAN (PRINT NAME): _____

RELATIONSHIP TO CHILD: _____ SIGNATURE: _____

STOP - PARENTS DO NOT COMPLETE THIS AREA BELOW

FEE PAID: Yes [] No [] Check # [] Visa or MC: []

BASEBALL:

Wee ball: _____ Tee ball: _____

Mach Pitch: _____ Minor: _____

Major: _____ 13-18: _____

LEAGUE AGE: []

TEAM ASSIGMENT: []

A COPY OF CHILD'S BIRTH CERTIFICATE MUST BE ATTACHED TO THIS APPLICATION UNLESS A COPY WAS FILED AT THE BEGINNING OF A PREVIOUS SEASON.

CHECK ONE : ____ Enclosed is a copy of birth certificate (NOT RETURNABLE)

____ A copy of birth certificate is on file from a previous season.

YEAR REGISTERED _____ or TEAM ASSIGNMENT TO _____