

CAPE FEAR OPTIMIST CLUB

2012 REGISTRATION FORM TO BE FILLED OUT BY PARENT

**** DUE AT REGISTRATION ****



****** ALL FEES ARE \$65.00 PER APPLICANT **NON-REFUNDABLE AFTER MARCH 1ST ****

**** LATE REGISTRATION FEE AFTER MARCH 1, 2012 OF \$75.00**

BASEBALL

- T-ball (Boys & Girls 5-6) []
- Coach Pitch (Boys 7-8) []
- Minor League (Boys 9-10) []
- Major League (Boys 11-12) []
- Dixie Boys (Boys 13, 14, 15 & 16) []
- Dixie Boys Jr (Boys 17 & 18) []

SOFTBALL

- Dixie Darlings (Girls 7-8) []
- Dixie Angels (Girls 9-10) []
- Dixie Ponytails (Girls 11-12) []
- Dixie Belles (Girls 13-15) []
- Dixie Debs (Girls 16-18) []

New Player or Player is advancing to Next League – Please Circle **“DRAFT”** here

Participants in T-Ball only may request a team assignment: Team Preference: _____

RETURNING PLAYER SECTION:

CFO RETURNING PLAYERS ~ PLEASE LIST THE TEAM & LEAGUE YOU PARTICIPATED IN LAST YEARS DIVISION: Spring 2011 League / Team: _____ / _____

Fall 2011 League / Team: _____ / _____

Name: _____

(Print child's name exactly as it appears on the birth certificate)

Street Address: _____ City: _____ Zip: _____

Birth Date: Month _____ Day _____ Year _____ ~ Playing Age _____ Phone # _____

PARENTS E-Mail (PRINT): _____

If there is a brother or sister playing on a team that the individual will be playing on, please fill out this section
Brother/Sister of _____

League _____ Team _____

I, THE PARENT OR GUARDIAN OF THE REGISTRANT ABOVE, DO HERBY GIVE MY CONSENT AND APPROVAL FOR HIS/HER PARTICIPATION IN ALL BASEBALL/SOFTBALL AND ASSOCIATED ACTIVIES DURING THE CURRENT SEASON. I ASSUME ALL RISK INCIDENTAL TO THE CONDUCT OF THE ACTIVIES AND TRANSPORTATION TO AND FROM THE ACTIVIES; AND I DO FURTHER RELEASE, ABSOLVE, INDEMNIFY, AND HOLD HARMLESS THE CAPE FEAR OPTIMIST CLUB, ANY OFFICER, AGENT OR EMPLOYEE OF THE CAPE FEAR OPTIMIST CLUB. THE ORGANIZERS, SPONSORS AND SUPERVISORS, ANY OR ALL OF THEM FROM ANY LIABILITY FROM INJURY AND/OR DAMAGE TO PERSON OR PROPERTIES. IN CASE OF INJURY TO MY CHILD, I HERBY WAIVE ALL CLAIMS AGAINST THE ORGANIZERS, THE SPONSORS OR ANY OF THE SUPERVISORS APPOINTED BY THEM. I LIKE WISE RELEASE FROM RESPONSIBILITY ANY PERSON TRANSPORTING MY SON/DAUGHTER TO OR FROM THESE ACTIVIES.

BY SIGNING THIS INSTRUMENT I AGREE THAT I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT.

Parent or Guardian (Print) _____ Relationship _____

Signature _____ Date _____

Registration Fee: \$ _____ Cash [] Check [] Check # _____

Birth Certificate: Copy Attached [] ~ Copy on File []

SHIRT SIZE _____
(Girls Only) SHORT SIZE _____