



Parkwood Hills Softball Association Player Registration Form for 2010

Website address: www.phsoftball.ca OR phone 225-4087

Player's Name _____ Male ___ Female ___ Returning Player Yes No

Address _____ Date of Birth D____M____Y_____

City _____ Postal Code _____ Telephone _____

E-mail address _____

Check one: Blastball \$40 (born 2004-2006) Mite \$70 (born 2001-2003) Midi-Squirt \$70 (born 1997-2000)
 Bantam-Novice \$80 (born 1992-1996)

Method of Payment: Cash Cheque Amount: \$_____ Receipt requested? ___ Yes ___ No

NSF cheques will be subject to a \$25.00 service charge.

Please make cheques payable to Parkwood Hills Softball Association.

Does the player have any previous playing experience? Yes_____ No_____

House League -Years played _____ Competitive -Years played _____

Special Requests: (Cannot be guaranteed; but PHSA will try to satisfy):

Contract

I hereby consent to my son/daughter participating in the Parkwood Hills Softball Association as a player. I understand that, in the event of accident or injury, the Association and any of its representatives will not be held responsible.

May we post your son's/daughter's team photo on our website?: Yes ___ No___

Parent or Guardian name printed

Parent or Guardian Signature

***** **HELP NEEDED** *****

PHSA is operated strictly on a volunteer basis and is always looking for fresh ideas and new people. If you would like to volunteer in any capacity, please fill out the following (Previous softball experience is not required):

Name _____ Phone Number _____

Please circle your interest: Coach / Assistant Coach Umpire Scorekeeper Convenor Other

Coaches T-shirt size. Please circle one: MEDIUM LARGE XLARGE XXLARGE

Please return completed form

Leah Henry-Leu
PHSA Registrar
1568 Merivale Rd. #333
Ottawa, ON K2G 5Y7

Office use only:

Receipt # _____

With payment to: