



INCORPORATING
TEEBALL BASEBALL SOFTBALL

REGISTRATION FORM

All correspondence to Club Treasurer - P.O. Box 148 Greenwood 6024

Please complete all sections of this form in block letters. The player (if over 18) or parent or guardian must sign this form before the player is registered with the Club.

Club Phone No: (08) 9448-4662

CLUB USE ONLY	
RECEIPT/DATE:	
FEE PAID	
TEEBALL	
BASEBALL	
SOFTBALL	
TEAM No	

SOFTBALL

Surname:		Sex M/F:	<input type="checkbox"/>	Age Group:	<input type="checkbox"/>
Given Names:		Phone Number:			
Address:		Suburb:		Postcode:	
Date of Birth:		Birth Certificate No:			
Last Year's Team:		School: (if applicable)			
Father/Guardian1:		Mother/Guardian2:			
Other Comments: (e.g. Softball-Fielding position preferences, emergency contact details, medical notes, etc. If more space needed use back of form.)		Email Address:			
		Mobile Phone No:			

I, the undersigned (if over 18)/parent /guardian of _____, wish my child/myself to play Softball with the Carine Cats Ball Club (Inc). I acknowledge there is a risk that my child/myself may suffer injury during the course of training or playing Softball. In consideration of your enrolling myself/my said child with your Club I hereby indemnify and agree to forever hold harmless, the Club, its executives, its coaches, umpires, managers and officials against all claims and demands as may be made by me or any other guardian of my said child/myself arising out of any injury my said child/myself may suffer during the course of training or playing Softball with your Club.

Image Consent: I agree to CCBC recording my child's image (photograph and video footage) for promotional purposes. I understand that my child's image may be used in the public domain across mediums including and not limited to publications, promotional material, official websites, print and electronic media. I acknowledge that my child's image will be used without any personal compensation or remuneration. I agree to forego any rights to my child's image including moral rights and copyright. **YES/NO (please circle as appropriate).**

Player (over 18)/Parent/Guardian Signature _____ Dated _____

Are you a sponsor for a team? YES/NO Sponsor's Name: _____

Please indicate where you will help with the following:

(Your assistance does not mean you are necessarily required to attend meetings).

SPONSORSHIP UNIFORMS PROPERTY COMMITTEE

Please indicate your willingness to assist your team with any of the following team positions:

COACH MANAGER UMPIRE SCORER Name of Volunteer: _____