



# Cabot Softball Association 2017 Spring Registration



**6u thru 12u----\$70.00 Per Player---14u & 16u--\$75.00 Per Player**

**Registration Ends  
Feb. 25, 2017**

**\$10.00 LATE FEE AFTER 3-4-2017**

**President: Rose Easter---743-9704**

**Ask about  
A sibling discount  
"Like" us on Facebook  
Cabot Softball Association  
Web site is: cabotsoftball.com**

**BIRTH CERTIFICATE MUST BE PROVIDED, If you think it is on file, please email Players Name & Birthdate to cabotsoftball@yahoo.com**

**EACH PLAYER MUST PROVIDER THEIR OWN BATTING HELMET with FACE MASK (with the EXCEPTION OF 6U) & GLOVE.  
CLEATS ARE OPTIONAL FOR 6u, BUT IS STRONGLY SUGGESTED FOR OTHER AGE GROUPS**

PRINT PLEASE

Players Name \_\_\_\_\_ Birth Cert. on file YES \_\_\_\_\_ NO \_\_\_\_\_

**Age as of 12-31-2016** \_\_\_\_\_ Birthdate--Mo \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Primary Custodial Parent(s) Name \_\_\_\_\_ Zip Code \_\_\_\_\_

Mother's Cell # with area code-(\_\_\_\_\_) \_\_\_\_\_ Father's Cell # with area code-(\_\_\_\_\_) \_\_\_\_\_

2016 Team you played for \_\_\_\_\_ Do you want to return to this team : \_\_\_\_\_

**All new players or players NOT returning to their Spring 2016 team must enter the draft.**

- \_\_\_\_\_ 6u Coach Pitch (*Birth Years of '10 & '11*)
- \_\_\_\_\_ 12u Fast Pitch (*Birth Years of '05 & '04*)
- \_\_\_\_\_ 8u Machine Pitch (*Birth Years of '08 & '09*)
- \_\_\_\_\_ 14u Fast Pitch (*Birth Years of '03 & '02*)
- \_\_\_\_\_ 10u Fast Pitch (*Birth Years of '07 & '06*)
- \_\_\_\_\_ 16u Fast Pitch (*Birth Years of '01 & '00*)

**If not enough players to separate the 14's & 16's into separate teams they may be combined together to for a 14/16 team & be listed as an official**

Emergency Contact Name & phone # other than the person(s) listed above:

**NAME \_\_\_\_\_ Phone # \_\_\_\_\_**

**WHAT TO EXPECT: PRACTICES WILL START AROUND A WEEK AFTER THE DRAFT TO ENABLE US TO OBTAIN SECONDARY INSURANCE ON THE PLAYERS. DEPENDING ON THE COACH HE/SHE MAY PRACTICE FROM 1-3 TIMES A WEEK. LEAGUE GAMES WILL START MID-APRIL TO THE END OF JUNE.**

**PLEASE READ THE FOLLOWING AND SIGN BELOW:**

We understand that this program is administered by the **VOLUNTEERS** of the Cabot Softball Association, Inc. (**CSA**) by way of OFFICERS, the EXECUTIVE BOARD, and a Coach representing each age group. Secondary ACCIDENT INSURANCE will be provided for each PLAYER and COACH through our program while participating in practices and games. I, the PARENT/GUARDIAN of the registrant for this softball program, hereby release, discharge and /or otherwise indemnify the CSA and its affiliated organization and sponsors against any claim by or on the behalf of the registrant as a result of the registrant's participation in the program and/or being transported to or from the same, which transportation I hereby authorize. As the PARENT / GUARDIAN of the above named player, I hereby give consent for emergency medical care prescribed by a duly licensed DOCTOR of MEDICINE or DOCTOR of DENTISTRY. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent.

**Signature of Parent/Legal Guardian \_\_\_\_\_ DATE \_\_\_\_\_**

### Tournament:

The Cabot Softball Association, as well as surrounding towns and parks, regularly host weekend tournaments. These are outside the scope of league play. You and your coaches have the option to play in these if you like. If you are specifically looking to place your daughter on a competitive travel team, we will pass your name along to Cabot coaches that are looking for players. These coaches hold their own tryouts.

### Coaches needed!!!

**Potential coaches should be available at least four hours a week and attend mandatory meetings/clinics.**

**If you would like information about coaching please contact Rose Easter @ (501) 743-9704.**

**If interested please check here**

Head Coach \_\_\_\_\_ Asst. Coach \_\_\_\_\_

NAME ON CHECK \_\_\_\_\_ CHECK # \_\_\_\_\_ CASH \_\_\_\_\_

RECEIPT # \_\_\_\_\_ AMOUNT \_\_\_\_\_ SIBLING DISCOUNT APPLIED \_\_\_\_\_