

**Souderton Area Softball League
2017 Fall Registration**

All registration forms should be completed and mailed along with
the \$50.00 registration fee to the address below by August 1st.

Jeremy Steglik
346 Railroad Avenue
Souderton, PA 18964

Important ** If your daughter is moving up to the next level in the spring, that is the level she should be playing
at for
Fall Ball. (i.e. played Cherub, 8 yrs old, turning 9 by Jan 1st 2018 will play U10 Fall Ball)

League Age

| <u>GIRLS SOFTBALL</u> | <u>FALL BALL AGE GROUP</u> | <u>Check Box</u> |
|-----------------------|----------------------------|--------------------------|
| U8 | 6-7-8 yrs old | <input type="checkbox"/> |
| U10 | 9-10 yrs old | <input type="checkbox"/> |
| U12 | 11-12 yrs old | <input type="checkbox"/> |
| U15 | 13-15 yrs old | <input type="checkbox"/> |

1) Child's Name _____ Phone Number _____ Email: _____
Alt Phone _____ Alt Email _____

2) Address _____
(House # and/or Apt. #, Street Name) (City) (Zip Code)
Township _____

4) Age as of Jan 1st, 2018 will be _____ Birth Date _____
(Month/Day/Year)

5) Father's Name _____ Mother's Name _____

I/We the parent(s) guardian(s) of the above mentioned boy/girl who is a candidate for a position in a Souderton Area Baseball League team, hereby give my/our approval to his/her participation in any and all activities of this league during the current season. I/We assume all the risks and hazards incidental to the conduct of the activities and transportation to and from these activities. I/We further hereby release, absolve, indemnify, and hold harmless the Souderton Area Baseball League, the Organizers, Sponsors, or any of the Supervisors appointed to them. I/We likewise waive to the extent not covered by liability insurance any claim against any person transporting my son/daughter to or from these activities. I/We will furnish a certified birth certificate of the above candidate upon request of league officials.

I hereby give my permission to SABL to use photographs of the above listed minor(s) in any publication, media release, SABL website and social media outlet, promotional announcement or advertisement, electronic or otherwise with the sole purpose of supporting and/or advertising of SABL. I agree that neither the above listed minor(s), nor I, will receive any compensation if such image appears in such publication, media release, SABL website and social media outlet, promotional announcement or advertisement, electronic or otherwise. In addition, I understand that such image is the property of SABL.

X _____ Date _____

I have read and understand the functions of the league as described above, and hereby agree to comply by these specifications by signing at the above 'X'

What team/age level did you play on this Spring? _____ Coach? _____

Questions or Concerns please contact:
Jeremy Steglik, VP Softball soudertonsoftballvp@gmail.com