

# Chillicothe Girls Softball League

All Registrations will be held at the Northside Library in Chillicothe

Dates for registration are as follows:

**March 10, 2016 (Thursday)**

**March 13, 2016 (Sunday)**

**March 20, 2016 (Sunday)**

**\*\*\* Deadline for all registrations is March 20, 2016 \*\*\***

The following items are to be returned at one of the above dates.

## PLEASE PUT IN THE ENVELOPE

- Team Roster. Please fill out completely.
- Copy of each girls Birth Certificate
- Permission to move up one level of play if applicable
- Copy of certificate that you successfully completed the **2016 Concussion Course**. (This is mandatory for all coaches. You can take the course **FREE** at [www.nfhslearn.com](http://www.nfhslearn.com)).

The team entry fee will be **\$200 for 8U & 10U** and **\$225 for 12U & 14U**.

Individuals signing up without a team will be required to pay **\$20** at registration.

Make checks out to Chillicothe Girls Softball.

**Season will start May 14, 2016**

Schedules along with a set of rules will be emailed the beginning of May.

Questions? Please contact:

Brandi Scott – 740-701-3477 or [thescottfamily@roadrunner.com](mailto:thescottfamily@roadrunner.com)

Brandy Spaulding – 740-253-9558 or [bspauldingdc@yahoo.com](mailto:bspauldingdc@yahoo.com)

# Chillicothe Girls Softball League

## Team Roster

Team Name: \_\_\_\_\_

League: \_\_\_\_\_

Coach: \_\_\_\_\_ Phone: \_\_\_\_\_

Coach: \_\_\_\_\_ Phone: \_\_\_\_\_

<u>Name</u>	<u>D.O.B.</u>	<u>Address</u>	<u>Phone</u>	<u>School</u>
1.)				
2.)				
3.)				
4.)				
5.)				
6.)				
7.)				
8.)				
9.)				
10.)				
11)				
12.)				
13.)				
14.)				
15.)				
16.)				
17.)				
18.)				

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I, the parent or legal guardian of the named player below has my approval to participate in all Girls Softball Activities. I understand that participating in softball may result in injuries and that protective equipment does not prevent all injuries to the player. I do hereby waive, release, indemnify, and agree to hold harmless the city of Chillicothe and the Chillicothe Girls Softball League Board.

<u>Player</u>	<u>Parent / Guardian Signature</u>
1.)	
2.)	
3.)	
4.)	
5.)	
6.)	
7.)	
8.)	
9.)	
10.)	
11.)	
12.)	
13.)	
14.)	
15.)	
16.)	
17.)	
18.)	

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## PERMISSION TO MOVE UP ONE LEVEL OF PLAY

I, \_\_\_\_\_ (parent/guardian's name),  
\_\_\_\_\_ (relationship to child) of \_\_\_\_\_ (Child's name),  
give permission to move my child up one level of play.

Date: \_\_\_\_\_

Parent / Guardian's Signature \_\_\_\_\_

League Supervisor Signature \_\_\_\_\_