

## EXTREME FALL BALL PLAYER REGISTRATION

SOFTBALL BC LIFETIME # \_\_\_\_\_

PLAYER NAME: \_\_\_\_\_ YEAR BORN: \_\_\_\_\_

HOME CLUB 2018: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

BC CARE CARD # \_\_\_\_\_

DOCTOR NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

DENTIST NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

CIRCLE PREFERRED GROUP:

(TUES & SUN ) 2003-2006 (WED & SUN) 2007-2010 (WED & SUN) 2000-2002

PLEASE CIRCLE INFIELD POSITIONS YOU ARE WILLING TO PLAY:

PITCHER CATCHER 1<sup>ST</sup> BASE 2<sup>ND</sup> BASE 3<sup>RD</sup> BASE SHORTSTOP

PLEASE CIRCLE T-SHIRT SIZE YM YL YXL S M L XL

1 FRIEND TO BE SURE IS ON MY TEAM: \_\_\_\_\_

### GUARDIAN INFORMATION:

1. GUARDIAN NAME: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

2. GUARDIAN NAME: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EXTRA EMERGENCY CONTACT: \_\_\_\_\_

\*\*\*WILLING TO COACH? NAME: \_\_\_\_\_

Please make \$60 cheques out to: Central Saanich Extreme Fastball Club.

Mail to: Extreme Fastball Club PO box 333 Brentwood Bay BC V8M 1R0 or

email registration for to [dhamer@telus.net](mailto:dhamer@telus.net) and bring a cheque on the first day.

FIRST COME, FIRST SERVED!!!!