

## Greenville Girls Fast Pitch Softball Registration – Fall 2024

Child's Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent/Legal Guardian Name #1: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Interested in being a head coach? Yes No An assistant coach? Yes No

Parent/Legal Guardian Name #2: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Interested in being a head coach? Yes No An assistant coach? Yes No

Did your child play softball for Greenville last year? Yes No

Does your child have any allergies, including bee stings? Yes No

If yes, please explain: \_\_\_\_\_

Does your daughter have any health concerns that the coach should be aware of? Yes No

If yes, please explain: \_\_\_\_\_

Name of Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship to Player: \_\_\_\_\_

### **T-Shirt Size:**

Youth S M L Adult S M L XL 2X

### **Preferred #:**

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Being the parent or guardian, I do hereby consent for my child to playing for Greenville Girls Fast Pitch Softball. I am fully aware of the risk of playing softball. I hereby hold harmless, Greenville Girls Fast Pitch Softball and its Board of Directors, The Town of Greenville, The Mercer County Fast Pitch Softball League and its Board of Directors, coaches, umpires, other players, employees of each, for any or all injuries which may occur a result of participation in the league.

Parent/Legal Guardian Name: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

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

## Commitment and Conflict Disclosure

In an attempt to fully inform our coaches during team selection, **please circle your commitment to attendance** throughout the season below.

**This will not affect your child's registration** – it is to gauge how often players may be absent to avoid last minute game forfeitures, canceled practices, etc. We understand children may be sick, injured, or have circumstances arise beyond your control.

**25%**

**50%**

**75%**

**100%**

We are also obligated to \_\_\_\_\_ thru \_\_\_\_\_  
(activity) (approximate date)

We are also obligated to \_\_\_\_\_ thru \_\_\_\_\_  
(activity) (approximate date)

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(activity) (approximate date)

We are also obligated to \_\_\_\_\_ thru \_\_\_\_\_  
(activity) (approximate date)

## Equipment

Are you able to supply your own helmet? Yes No

Are you able to supply your own glove? Yes No

Are you able to supply your own bat? Yes No

Are you able to supply your cleats? Yes No

If no, what size shoe does your child wear? \_\_\_\_\_

## Sponsor an Athlete

Greenville Girls Fast Pitch Softball does not want to turn a player away due to financial hardship. You can help an athlete having financial difficulty but wanting to play by paying towards their registration fee. Any amount is accepted.

I would like to sponsor another athlete in the amount of \$\_\_\_\_\_ and will add it to the total due to the program.

## **Greenville Girls Fast Pitch Softball Parent Code of Conduct (Mandatory)**

I pledge to provide positive support, care, and encouragement for my child participating in the Greenville Girls Fast Pitch Softball program, by following the parent code of conduct.

As a supportive Parent, I will:

- Encourage good sportsmanship by demonstrating positive support for all players, coaches, managers, and other officials at every game, practice, or other event.
  - Support coaches, managers, and officials working with my child in order to encourage a positive and enjoyable experience for all.
  - Do my best to make softball fun for my child and her teammates.
  - Help my child enjoy her softball experience by being a respectful fan and supportive parent.
  - Treat other players, coaches, managers, fans, and umpires with respect regardless of race, sex, or ability.
  - Remember the game is for youth, not adults.
- 

### **Above All:**

The Softball Complex is a NO SMOKING facility, you are responsible for all guests, relatives, and friends that attend. **Initial:** \_\_\_\_\_

There is to be NO FOOD in the dugout. **Initial:** \_\_\_\_\_

NO ONE is allowed in the dugouts other than coaches and players.  
**Initial:** \_\_\_\_\_

Agree to be responsible for any actions from relatives, friends, or fans in attendance to watch your child play the game. **Initial:** \_\_\_\_\_

By registering your child to participate in any Greenville Girls Fast Pitch Softball program, you also agree that if you fail to abide by the mentioned rules and guidelines, you (the parent/legal guardian) will be subject to disciplinary action that could include, but is not limited to the following:

- Verbal warning by an official, head coach, and or league officer.
- Parental game suspension with written documentation of the incident kept on file by the organizations involved.
- Parental season suspension.

Parent/Legal Guardian Name: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

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

# *Greenville Girls Fast Pitch Softball*

## Photo Use Release Form

I, \_\_\_\_\_, hereby grant and authorize coaches/board members the right to take, edit, alter, copy, exhibit, publish, distribute, and make use of any and all pictures taken of my child, \_\_\_\_\_, to be used in and/or for legally promotional materials including, but not limited to: flyers, posters, brochures, advertisements, press kits, submissions to journals, websites, social networking, and other print and digital communications, without payment or any other consideration. This authorization extends to all languages, media, formats, and markets now known or hereafter devised. This authorization shall continue for the 2024 fiscal year, unless there is a revoke in writing.

I understand and agree that these materials shall become the property of Greenville Girls Fast Pitch Softball and will not be returned.

I hereby hold harmless, and release Greenville Girls Fast Pitch Softball from all liability, petitions, and cause of action which I, my heirs, representative, executors, administrators, or any other persons may make while acting on my behalf or on behalf of my estate.

If the person being photographed is under the age of consent, then this release must be signed by a parent or guardian, as follows:

I hereby certify that I am the parent or legal guardian of \_\_\_\_\_, and do hereby give my consent without reservation to the foregoing on behalf of this individual.

\_\_\_\_\_  
Print Parent/Guardian Name

\_\_\_\_\_  
Relationship to Child

\_\_\_\_\_  
Print Minor Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
E-Mail Address

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date