





## SOCAL GIRLS FASTPITCH SUMMER REGISTRATION

Player Last Name, First Name:	DOB:
Player Address:	
Player School Attended:	Grade:
Are you registering for : ☐ Las Palmas ☐ Valley Mesa	
Are you a returning player: ☐ Yes ☐ No If yes, which team:	Year of Experience:
Would you like to return to the same Summer team?	<u> </u>
Softball Positions Played: ☐ Pitcher ☐ Catcher ☐ Infield:	
Shirt/Jersey Size: ☐ Youth X-Sm ☐ Youth Sm ☐ Youth Med ☐ You	outh Lg 🗌 Youth XL
☐ Adult Sm ☐ Adult Med ☐ Adult Lg ☐ Adult XL ☐ Adult 2	2XL
<b>Buy Outs:</b> ☐ Snack Bar Buy Out \$ 30 ☐ Fundraiser Buyout \$30	
Section below to be completed for players <u>under 18 years of age</u> .	
Parent/Guardian Name 1:	Contact Number:
Email address:	
Parent/Guardian Name 2:	Contact Number:
Email address:	
Emergency Contact Name:(Not a parent or guardian)	Contact Number:

## Photograph, Film and Video Permission

I/We give my child permission to participate in Socal Girls Fastpitch sports program and grant the organizers of program and their partners the right to photographs, film, and/or videotape my child during the program.

I understand that the photographs, film, and/or videos may be used for promotional and educational purposes by the directors, organizer and their partners. This includes, but is not limited to, use of internet, social media, newsletter, brochures, and other publications.

I understand that my child's name may be included in any to photographs, film, and/or video and that my child will not receive any compensation for the use of their image. I release and discharge the organizers, directors and volunteers of the program and their partners from any and all claims and demands arising out of or in connection with the use of my child's to photographs, film, and/or video. I certify that I am the parent/guardian of the above-named youth athlete and have the authority to enter into this agreement.

## **Zero Tolerance Policy**

Before, during, and after all games the following will be enforced:

- 1. Players, coaches, assistant coaches, parents, and spectators MAY NOT make insulting or negative remarks, directly or indirectly, to or about opposing players, officials, or spectators or commit other acts that could be considered unsportsmanlike.
- 2. Players, coaches, assistant coaches, parents, and spectator MAY NOT directly or indirectly make comments to or about the officiating crew or otherwise badger the officiating crew.
- 3. Players, coaches, assistant coaches, parents and spectators MAY NOT use profanity at any time. Use of profanity may get you ejected from a game, suspended from the next game or ejected from the league.
- 4. Officials will give one warning to a player, coach, assistant coach, parent or spectator for misconduct. Upon the second infraction the player, coach, assistant coach, parent or spectator shall be ejected from the game site.
- 5. Any player, coach, assistant, parent or spectator that is ejected from the game will be automatically suspended from participation in the next league/tournament game for any reason.
- 6. Failure to abide by any condition of this rule may result in forfeiture of the game and additional sanctions.
- 7. If there is a physical altercation between a player, coach, assistant coach, parent, or spectator and an official, such person shall be automatically ejected from the game site and shall be automatically suspended from participation in the SCGF's sports league and may be expelled from SCGF pending review by the Sports committee for that sport. Local authorities/police will be contacted.

I/We, the legal responsible adult for the above named player, do hereby give consent for participation in all activities sponsored by SoCal Girls Fastpitch including transportation to and from such activities. I/We agree to furnish a certified copy of the birth record upon request. I/We understand that participation in any sport can result in serious injury and that protective equipment may not prevent all injuries. Therefore, I/We do hereby waive, release, absolve and hold harmless any claims arising out of injury to my child whether as a result of negligence or accident on the part of the player or other league members.

In case of injury requiring immediate professional medical treatment, transportation, doctor or medical facility will be chosen in accordance with USSSA, SoCal Girls Fastpitch, and State of California.

Player Signature:	Date:	
Parent Signature:	Date:	
	(SoCal Girls Fastpitch Use Only)	
Division:	Team:	
Registration Fee Paid / Date:		

Phone Number: (619) 856-1680 Email: socalgirlsfastpitch@mail.com