



REGISTRATION FORM - 2009

Registrations received by February 15, 2009 are given priority for placement on your team from last year.

First Name: _____ Last Name: _____ Birth Date: _____

Address: _____ Mother's Name: _____

_____ Father's Name: _____

Postal Code: _____ Telephone: () _____ Cell Phone: () _____

Email: _____ School: _____

Friends/Teammates: _____

Previous experience playing organized softball or baseball (note: experience not required): _____

Year Born	Age at Dec 31/09	Division	Registration Fee	Days Games Are Played On*
2003 or 2004	5 or 6	Learn to play	\$70	Saturday
2002 or 2001	7 or 8	Mini-Mites	\$120	Tue & Thu
2000 or 1999	9 or 10	Mites	\$120	Mon & Wed
1998 or 1997	11 or 12	Squirts	\$130	Tue & Thu
1996 or 1995	13 or 14	Pee Wee	\$130	Mon & Wed
1994 or 1993	15 or 16	Bantam	\$140	Tue & Thu
1992,91 or 90	17, 18, 19	Midget	\$140	Mon & Wed

* A late fee of \$20 is payable for all registrations received after February 28, 2009
 Season runs from the beginning of April to late June each year.
 On average there are two games per week. There may also be occasional weekend daytime games.

TO REGISTER PLEASE COMPLETE AND MAIL THIS FORM TOGETHER WITH YOUR CHEQUE PAYABLE TO WVGSA
 PO BOX 91101
 WEST VANCOUVER POSTAL OUTLET
 WEST VANCOUVER, BC V7K 3H2

WE ARE ALSO LOOKING FOR VOLUNTEERS

Please check any that your family is interested in: COACH ASSISTANT-COACH
 UMPIRE UNIFORMS FUNDRAISING DONATION
 TEAM MANAGER CLEANUP/SETUP EQUIPMENT EXECUTIVE

Waiver: I hereby for myself, my heirs, executors and administrators, waive any and all rights and claims that I may have or that might arise against the Municipality of West Vancouver, the West Vancouver Parks and Recreation representatives and the West Vancouver Girls' Softball Association and its representatives for any and all injuries and losses suffered by my child while competing or in connection with any program of the West Vancouver Girls' Softball Association. I expressly consent to the Association's collection and use for Association related purposes, of the personal information I am providing on this registration form, including its release as required to the British Columbia Amateur Softball Association and to the Canadian Amateur Softball Association. I also expressly consent to the use of my child's photograph while participating in WVGSA activities to be used for promotional purposes such as on the WVGSA web site and in local media.

Signature of Parent or Guardian: _____

Date: _____

Amount Enclosed:
 Registration \$ _____
 Donation \$ _____
 Total \$ _____