

Charlton Softball Association

PO Box 94, Charlton, MA 01507

2010 Application for Participation

FIRST NAME: _____ **LAST NAME:** _____

ADDRESS: _____

PHONE: (508) _____ **DOB:** _____ **AGE AS OF 12/31/09** _____

MOTHERS NAME: _____ **Cell/Pgr:** _____

FATHERS NAME: _____ **Cell/Pgr:** _____

Or Emergency Contact: _____ **PHONE:** _____

EMAIL ADDRESS: _____ **BIRTH CERTIFICATE:** _____

We have a group mailing address at Yahoo and only the Executive Board is authorized to send email. Using email reduces mailings and phone calls. Please consider putting your email back on if you had asked for it to be removed. Please list parent's email and not kids for obvious reasons

T-Ball (born '04- '05), Instruct (coaches pitch) (Born '02- '04) Intro (girls pitch) (Born '99-'02) Junior's (Born '97-'98), Senior's (Born '92-'96). There will be a cutoff of 78 girls in Intro and Junior divisions.

We are always looking for help in several areas (coaching, field maintenance, concession stand). Please indicate if you are interested in helping out in any way. Also, please list any trades, skills or specialties you would be willing to share with our league. We cannot run this league without your help!

Manager _____ Coach _____ Team Parent _____ Concession _____ Equip Mgr _____

Field Maint. _____ Fundraising _____ Tournaments _____ Skills _____

Other areas _____

LAST TEAM PLAYED FOR: _____

MOVE TO NEXT DIVISION: INSTRUCT _____ INTRO _____ JUNIOR _____ SENIOR _____

FEE (SINGLE FAMILY) 1/\$80 _____ 2/\$140 _____ 3/\$180 _____

PAID BY CHECK# _____ **CASH** _____ **AMOUNT:** _____