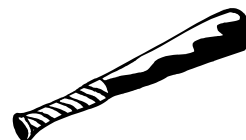


Convoy Sports Center 2010 Registration Form



Player's Information

Child's Name _____ Girl's age on January 1, 2010 _____
 Boy's age on April 30, 2010 _____ Rookie/Farmette Girls' Age on 7/1/10 _____
 Child's Phone Number _____ Child's Birthday _____
 2009 Team _____ **OR** New Registration

T-Shirt size (circle one): Youth S / M / L Adult S / M / L / XL / XXL (t-shirts typically run small)

In Case of Emergency:

In case of emergency your child will be transported to Van Wert County Hospital.

Family Physician & Phone Number: _____

Family Dentist & Phone Number: _____

Any Allergies or Medical Problems: _____

Emergency Contacts & Phone Number: 1. _____

2. _____

Parent or Guardian Info:

Parent/Guardian Name: _____

Address _____

Email address _____ cell phone number _____

In order for Convoy's youth programs to be successful, I understand that I will be expected to work in the concession stand at least once per child during the regular season and at the fair or pay the extra fee for outsourcing workers.

I will work the concession stands. _____

I will pay extra to outsource. _____

I, as the parent or guardian of the above named child, will not hold the coaches, the drivers, or the sponsoring organization responsible for any accidents that may occur.

Signed _____

<p>My boy will try out for Little League.</p> <p>_____ Yes _____ No</p>
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<p>I am willing to volunteer in the following area(s):</p> <p><i>Team Parent</i> <i>Coaching</i></p> <p><i>Board Member</i></p> <p><i>Other:</i> _____</p>
