

St. Louis Park Girls Fastpitch Association  
 Summer Fastpitch Registration 2010

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Current Grade \_\_\_\_\_  
 Address \_\_\_\_\_ School \_\_\_\_\_  
 City \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone (     ) \_\_\_\_\_ E-mail \_\_\_\_\_  
 Father \_\_\_\_\_ Work (     ) \_\_\_\_\_ Cell (     ) \_\_\_\_\_  
 Mother \_\_\_\_\_ Work (     ) \_\_\_\_\_ Cell (     ) \_\_\_\_\_

PRINT clearly

The St. Louis Park Fastpitch Association is a non-profit association. The association's vision is to offer girls in K - 12th grade the opportunity to be exposed to the Sport of Fastpitch Softball, develop the basic fundamental skills and strategies needed to play in a game setting and continue to develop those skills so that they can participate in a more competitive game setting. In addition, the program hopes to assist in the development of teamwork, responsibility, cooperation, and overall enrichment of competitive sports.

**ASA Traveling Leagues**  
**\$250.00**, fee includes 2 tournaments  
 Age of girl as of Dec. 31st, 2009

		<b>EOS Tourney</b>	
16 & Under	_____ All Games	Mid July	
14 & Under	_____ Are	Mid July	
12 & Under	_____ Double	Late June/Early July	
10 & Under	_____ Headers	Late June/Early July	

The ASA traveling program is designed for players who want to participate at a high level of competitive softball and commit to 2-3 nights of play or practice per week. Participating teams will be within the Southwest Suburban League teams primarily in the south and west Metro areas.  
 Games run from May - Mid July

**In-House Softball Leagues**  
**\$90.00** Includes EOS Tournament (D2-D4)  
 Grade of girls in the 09-10 school year

D1 (\$50)	K - 1st	Coach Pitch	_____
D2	2nd - 3rd	Machine Pitch	_____
D3	4th - 5th	Player Pitch	_____
D4	6th, 7th & 8th	Player Pitch	_____

The In-House league is designed for all girls regardless of skill level or experience. Plan on 2 nights a week of practice or games. Participating teams include Minnetonka, Hopkins, Wayzata, Plymouth and Orono.  
 Games run from May to mid-July **10-11(EOS Tourney)**

Scholarships available on an as needed basis. Please contact the Kris Howes @ slpfastpitch@hotmail.com

**A separate, refundable deposit check of \$100.00 will be collected from all registrants to assure participation in the fundraising events. Once these obligations have been full-filled, the check will be destroyed.**



**Registration Due before Friday March 26th**

Either drop registration forms off at any of the Winter clinics or mail to:  
 SLP Fastpitch 3700 Monterey Dr.  
 St. Louis Park, MN 55416

**Emergency Information**

Physician/Clinic \_\_\_\_\_ Phone \_\_\_\_\_

Medical Insurer \_\_\_\_\_ Policy # \_\_\_\_\_

Dentist \_\_\_\_\_ Phone \_\_\_\_\_

Dental Insurer \_\_\_\_\_ Policy # \_\_\_\_\_

**Who should be contacted if Parent/Guardian cannot be reached:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**VOLUNTEER OPPORTUNITIES**

We would like to have ALL parents/guardians help out as much as they can because we are a VOLUNTEER organization. Your help is crucial in making this a successful program. Please indicate where you can help!

Team Coach \_\_\_\_\_ Board Member \_\_\_\_\_

Assistant Coach \_\_\_\_\_ Kick-Off Event \_\_\_\_\_

Team Parent \_\_\_\_\_ Fundraising Committee \_\_\_\_\_

Team Sponsor \$250 \_\_\_\_\_ Uniform Distribution \_\_\_\_\_

Your Name \_\_\_\_\_ Best way to reach you: Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Contact Information \_\_\_\_\_

Please direct any questions to Kris Howes, SLP Fastpitch Association [slpfastpitch@hotmail.com](mailto:slpfastpitch@hotmail.com)  
[www.e-sportsclubs.com/stlouisparkfastpitch](http://www.e-sportsclubs.com/stlouisparkfastpitch)

**Parent/Guardian Agreement and Medical Care Consent:**

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the "Organization" (SLPFA or Suburban League), its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with fastpitch softball and in consideration for the Organization accepting the registrant for its fastpitch program, I hereby release, discharge and or otherwise indemnify the Organization, their employees and associated personnel, including the owners of the fields and facilities utilized for the program against any claim by or on behalf of the registrant as a result of the registrant's participation in the program and/or being transported to or from the same, which transportation I hereby authorize.

As Parent/Guardian of a participant in the program, I hereby give my consent for emergency medical care prescribed by a duly licensed physician or dentist. This care may be given under whatever conditions are necessary to preserve life, limb or well-being of my dependant.

Signature \_\_\_\_\_

Date \_\_\_\_\_