

**2021 SKILLS REGISTRATION FORM**  
**August 10-12**  
**9:00 am to 1:00pm**  
**AMSTERDAM GIRLS SOFTBALL ASSOCIATION**

**FEES**

\_\_\_\_\_ **SKILLS \$70.00:**    \_\_\_\_\_ **SKILLS & FALL BALL \$80** (Please fill out fall ball form also)

\_\_\_\_\_ **SKILLS, FALL BALL & 2022 SUMMER TRAVEL DEPOSIT \$155** (Please fill out travel form also)

\_\_\_\_\_ **ALL THREE PAID IN FULL \$ 230**

Non Refundable.

**As fall ball is based on 2022 ages, those committed to Summer 2022 will have first option for open Fall Ball roster spots.**

**MEDIA RELEASE** – I consent to have my child included in media coverage/advertising of the AGSA. **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

**\*\* PLEASE PRINT CLEARLY \*\***

PLAYER NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

AGE AS OF 1/1/2021 \_\_\_\_\_ ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

PHONE NUMBERS: HOME \_\_\_\_\_ CELL \_\_\_\_\_ WORK \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

RETURNING PLAYER: **YES** **NO** If yes, 2021 Team \_\_\_\_\_ 2021 League: **8U, 10U**  
(Check one) **Advanced**

PRIMARY POSITION(S) PLAYED THIS: Pitcher \_\_\_\_\_ Catcher \_\_\_\_\_ Infield \_\_\_\_\_ Outfield \_\_\_\_\_

EMERGENCY CONTACT NAME: \_\_\_\_\_ PHONE \_\_\_\_\_

ALLERGIES: \_\_\_\_\_ MEDICAL RESTRICTIONS: \_\_\_\_\_

PRIVATE INSURANCE: YES \_\_\_\_\_ NO \_\_\_\_\_ (AGSA provides secondary medical insurance)

**CONSENT:** I consent to the above named player participating in the Amsterdam Girls Softball Association softball program. I recognize that there are certain risks and hazards incidental to the game of softball which may at times result in injury. I permit the Association; it's officers or representatives, to provide medical treatment to the above named player in the event of emergency or injury. I am also aware that the league has medical coverage/insurance with a \$250 deductible, which payment is the responsibility of the parent/player. In the event of an emergency, I further consent to any treatment of tests deemed necessary by any medical staff on duty.  
I have read and agree to abide by the Code of Conduct posted on the Amsterdam Girls Softball Association Website. Failure to abide by this Code of Conduct by any family member present (adult, child, player) can cause grounds for removal and dismissal of team participation.

**Parent/guardian signature of consent:** \_\_\_\_\_ **DATE** \_\_\_\_\_