

LOPATCONG ATHLETIC ASSOCIATION  
232 South 3<sup>rd</sup> St., Phillipsburg, NJ 08865  
(908) 859-3355 Web site: [www.lopatpanthers.org](http://www.lopatpanthers.org)

## SOFTBALL REGISTRATION SPRING 2010

CHILD'S NAME: \_\_\_\_\_ BIRTHDATE \_\_\_/\_\_\_/\_\_\_ AGE \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ SPRING 2010 GRADE: \_\_\_\_\_

Did you play last year? Yes No If yes, name of coach: \_\_\_\_\_

Have you ever played softball for another Phillipsburg area Organization? (Holy Name, Alpha, Greenwich, etc.)

Yes No If yes, please indicate name of Organization \_\_\_\_\_

Fee \$45 per Child **\*\* (LATE FEE after Jan. 23rd, 2010): \$30/child**

**Please make checks payable to: Lopatcong Athletic Association**

### PARENTAL/GUARDIAN CONSENT

My child has parental/guardian consent to participate in the Lopatcong Athletic Association's softball program for the 2010 season. The fee that is required at registration time is for individual secondary insurance coverage, equipment and other related costs. This fee must be paid and this consent form must be signed before a child is allowed on the practice field and issued a uniform. **Also, there will be NO REFUNDS of registration fees after any teams' first practice.** As a consenting parent/guardian, I agree to take proper care of any recreational equipment and uniform loaned to my child during the season. I also promise to deliver the equipment and uniform to the coach or designee in good condition and appropriately cleaned at the end of the season. I understand that if I do not turn in any equipment or uniform at the end of the season, I will be billed for the cost of said equipment/uniform. **Please be informed that any child who leaves the LAA softball program to play for another organization will be ineligible to play sports for LAA for one full year.** The Lopatcong Athletic Association has an open public meeting the forth Tuesday of each month at 7:30 p.m. in the Lopatcong Township Municipal Building. Your attendance is always welcomed. By my signature, I understand and accept all the conditions stated above.

*Parent/Guardian's*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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RECREATION USE ONLY: Amount Paid: \_\_\_\_\_ Late fee:  Cash  Check#: \_\_\_\_\_ Rec'd by: \_\_\_\_\_