

Date:

**PARK SHARON ATHLETIC ASSOCIATION**

8508 PARK ROAD #166  
CHARLOTTE, NC 28210

www.ParkSharonSports.com

Player's Name

Gender  Birth Date

Primary Email Address

Home Phone

Address

City  State  Zip

Did (s)he play in our league last year?  # Seasons?

Medical Comments

Special Request

Parent 1 Relationship (circle) MOTHER FATHER GUARDIAN

Parent 1 Name

Parent 1 Cell Phone  Work Phone

Parent 1 Work Email

Parent 1 Employer

Parent 2 Relationship (circle) MOTHER FATHER GUARDIAN

Parent 2 Name

Parent 2 Cell Phone  Work Phone

Parent 2 Work Email

Parent 2 Employer

**VOLUNTEERS** are needed to make PSAA a success for our kids! Please sign up for at least one of the areas below. (M=Mother, F=Father, G=Guardian)

**Please note that one parent/guardian from each household is asked to cover at least one concession stand shift per season.**

Team Coach \_\_\_\_\_ Facilities/Maintenance \_\_\_\_\_ Registration \_\_\_\_\_  
Asst Team Coach \_\_\_\_\_ Sponsor \_\_\_\_\_ League Director \_\_\_\_\_  
Team Parent \_\_\_\_\_ Uniforms/Trophies \_\_\_\_\_ Field Work \_\_\_\_\_

I/We the parent(s) or guardian of the candidate named in the above sport, give my/our approval for the candidate's participation in any and all League activities; and I/We do hereby waive, release, absolve. Indemnify and agree to hold harmless the sponsors, supervisors, participants and persons transporting the candidate to or from activities for any claim arising out of injury to the candidate, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance. I/We do certify that the candidate is physically sound to participate in intramural basketball, baseball, soccer, softball, wrestling, and/or cheerleading. I/We accept responsibility for and agree to return on request the uniform and other equipment issued to the candidate at time and place specified, such equipment to be returned in as good a condition as when received except for normal wear and tear. I/We will furnish a certificate of physical fitness when required. I/We understand that the candidate is not completely registered until all application fees and such certificates as required are in the hands of the Player's Agent and that until such commitments are completed, the candidate may be temporarily suspended from further practice or play.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

**Office Use Only**

Sport

League Age

**BASEBALL**

T-Ball (5-6)    
Coach Pitch    
Machine Pitch (7-8)    
Minors (9-10)    
Majors (11-12)    
Babe Ruth (13-14)    
Babe Ruth (15-17)

**SOCCER**

Tots N Tikes    
Muppet (U6)    
Co-ed (U8)    
Co-ed (U10)    
Co-ed (U12)    
Co-ed (U14)    
Girls (U8)    
Girls (U10)    
Girls (U12)    
Girls (U14)

**SOFTBALL**

Coach Pitch    
Fast Pitch (U10)    
Fast Pitch (U12)    
Fast Pitch (U15)

**BASKETBALL**

Girls (All)    
Instructional (5-6)    
Co-Ed (7-8)    
Boys (9-10)    
Boys (11-12)    
Boys (13-14)    
Boys (15-17)

**CHEERLEADING**

Ages 5-8    
Ages 9-10    
Ages 11 & Up

**MEMBERSHIP FEE**

TOTAL

**CASH**

CHECK#