PHONE/RAIN LINES: (434) 970-2273 / 970-2255

FAX: (434) 296-0401

EMAIL: covecreek@covecreekpark.com WEBSITE: www.covecreekpark.com

2024 SOFTBALL REGISTRATION FORM COVE CREEK PARK REGISTRATION FEE: \$40

1. NAME						2. SEX	
	(last)	(first)			(middle)	<u> </u>	
. ADDRES	s						
(street)			(city)			(zip)	
BIRTH D	(month, day, y		DDRESS(ES):				
. PHONE_							
	(home/primary)	(mom's work)	,	•	(mom's cell)	(dad's cell)	
. PARENTS	PARENTS OR LEGAL GUARDIANS:(moti			r) (father/mother)			
. PLAYERS	S SCHOOL:						
). DIVISION	LEAGUE AGE DETE	ERMINED BY FOLLOWIF	NG: IF PLAYER HA	Minor Le	eague (9, 10, 11)	RY 1, 2024	
	Rookie League (7 & 8)			Major League (12 - 14)**			
Note: O	nly softball players I Note: LEAGUE PLAY: The	eague age 14 who <u>are n</u> All female and male pl	ot playing JV at the ayers ages 5 and 6 has adopted a rule b	eir respective s will play in on anning play in I	schools are eligible Tee Ball League more than one rec	reational league. A player wh	
I1. TEAM C	COMMITMENT: A play	ver who registers to play asse do not sign up if you	at Cove Creek will be	expected to pa	articipate in all pos	sible team practices,	
		Cove Creek Park reservetermined number of regi		egistration in ar	ny division, at any	time. Such action will take pl	
13. MISCEL (a)		you are granting Cove Cr	eek Park permission	to seek emerg	ency medical atter	ation for your child should it	
(b)) Every player shall be expected to return uniforms and equipment upon request from his/her coach or Park official;						
(c)	A registration fee of \$40.00 shall accompany this registration form. Fee waivers are readily available and will be handled with complete discretion. Please contact Jennifer at the park office via phone or email to request a fee waiver.						
		HIS/HER PARENTS OR ETERMS AND CONDITION		IS HAVE REAI	O AND FULLY UN	DERSTAND THE ABOVE	
_	PLAYI	ER		PAF	RENT OR LEGAL	GUARDIAN	
_	DATI			PAF	RENT OR LEGAL	GUARDIAN	

Return with Payment to:

Cove Creek Park P. O. Box 9 Covesville, VA 22931