



# Player Registration



Player Age Division according to birthday (*circle one*): 10U 12U 14U 16U 18U  
Tryout Date: \_\_\_\_\_

### PLEASE WRITE LEGIBLE

Player Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

School District: \_\_\_\_\_

Current School: \_\_\_\_\_ grade: \_\_\_\_\_

If applicable, Middle School (to attend): \_\_\_\_\_

If applicable, High School (to attend): \_\_\_\_\_

Spring/Summer team: \_\_\_\_\_

level/age group: \_\_\_\_\_ Position(s): \_\_\_\_\_

Mother's Name: \_\_\_\_\_ cell #: \_\_\_\_\_

Email address (*please write legible*): \_\_\_\_\_

Interested in: coaching \_\_\_\_\_ volunteering \_\_\_\_\_

List any skills, knowledge or business you could help provide:

\_\_\_\_\_  
\_\_\_\_\_

Father's Name: \_\_\_\_\_ cell #: \_\_\_\_\_

Email address (*please write legible*): \_\_\_\_\_

Interested in: coaching \_\_\_\_\_ volunteering \_\_\_\_\_

List any skills, knowledge or business you could help provide to our organization:

\_\_\_\_\_  
\_\_\_\_\_

Additional comments to consider: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*initials*

**Upon acceptance to the WarCats, a non-refundable \$100 player fee is due by** \_\_\_\_\_

**Liability Waiver:**

In consideration for being allowed to participate in tryouts for the Westerville WarCats Fastpitch Softball Organization, LLC, I release from liability and waive my right to sue the Westerville WarCats Fastpitch Softball Organization, their employees, officers, volunteers and agents, (collectively "Organization") from any and all claims. This includes claims of the Organization's negligence, resulting in physical injury, illness (including death), or economic loss that I may suffer or which may result from my participation in tryouts, travel to and from tryouts, or any events incidental to the tryouts.

I acknowledge that like other sports and activities, fastpitch softball has a certain amount of inherent danger and risk involved. By signing below, I acknowledge that as the parent/guardian of the player, has received, read, and fully understands and agrees to all terms and conditions of this waiver.

parent/guardian signature \_\_\_\_\_ date: \_\_\_\_\_

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*For Warcat Softball Use only:*

Rating Scale: **1** needs work, **2** below average, **3** average, **4** above average, **5** excellent

**Collective Average:**

|       |                      |       |                      |        |                      |                     |                      |
|-------|----------------------|-------|----------------------|--------|----------------------|---------------------|----------------------|
| throw | <input type="text"/> | catch | <input type="text"/> | field  | <input type="text"/> | hit                 | <input type="text"/> |
|       |                      | run   | <input type="text"/> | effort | <input type="text"/> | <b><u>TOTAL</u></b> | <input type="text"/> |

If applicable, pitching and/or catching comments:  
\_\_\_\_\_  
\_\_\_\_\_

Date called: \_\_\_\_\_ Team: \_\_\_\_\_

WarCats Offer:    yes    no                      Response:    accept    decline

Notes: \_\_\_\_\_  
\_\_\_\_\_