



2018 Cardinal Power Fastpitch Association Player Registration

Check Age Group

- | | | | | |
|--------------------------|------------------|----------------------------|------------------|---|
| <input type="checkbox"/> | 8u | CARDINAL CADET | \$50/yr | \$65 If you need a new jersey or are a new player |
| <input type="checkbox"/> | 10u—12u | CARDINAL APPRENTICE | \$ 110/yr | \$125 If you need a new jersey or are a new player
League play, practices, and Fairmont Tourney & League Tourney
Teams may play additional weekend tourneys & split costs |
| <input type="checkbox"/> | 14u - 18u | CARDINAL CHOICE | \$ 110/yr | \$125 If you need a new jersey or are a new player
League play, practices, and Fairmont Tourney & League Tourney
Teams may play additional weekend tourneys & split costs |

One Registration form per child, Family max is \$225

<u>Player Information</u>	<u>Parent One Information</u>	<u>Parent Two information</u>
Name: _____	Name: _____	_____
Address: _____	Address: _____	_____
City/State: _____	City/State: _____	_____
Player Phone: (optional) _____	Parent Cell: _____	_____
Date of Birth: _____	Parent Home: _____	_____
Age on 12/31/2017: _____	Parent Work: _____	_____
Preferred Age Group to Play: _____	Parent Email: _____	_____
Uniform Top: Player # _____		
Circle Top Size: YM-YL-AS-AM-AL-AXL-AXXL		
Players responsible for black pants, uniform top, batting helmet, (prefer Cardinal color), glove, spikes, face mask (infielders)		

Please fill out both pages of Registration and mail form and check to

Cardinal Power Fastpitch Po Box 381, Fairmont, MN 56031

- ★ Players need to provide a copy of their original birth certificate
- ★ Picture/photo ID is required of all players

Jim Tschumperlin 507-230-0745, Brian Johnson 507-236-4643, info@cardinalpower.club

Office Use Only

___ Reg form	___ Payment
___ Birth Cert.	___ Jersey #
___ Photo	Date _____
Initial _____	

Participation Agreement/Cardinal Power Association

I am the parent and/or legal guardian of _____; and I hereby give her permission to participate in the activities and events of the Cardinal Power Association.

I understand and agree to all of the terms and conditions in this agreement in consideration for her acceptance for participation in the activities and events of the Cardinal Power Association.

Activities and Events of Cardinal Power Association:

Organize girls' softball teams for play in the traveling Southern Star League and for play in tournaments,

Sponsored by other communities and organizations;

Organize and implements fundraiser's and participates in other community events;

Provides bats, balls, catcher's gear, and arranges for and schedules volunteer coaches for team play;

Provides a batting cage at Cardinal Park, pitching machines, helmets and other gear for individual or team use

And provides equipment at Gemini Studios for pitching instruction;

Organize and host a softball tournament during the summer; and provide support for the Fairmont Cardinal tournament in July by working a shift during the tournament on the opposite day your child plays.

Cardinal Power Association takes no responsibility for transportation of participants. All transportation is the sole and absolute responsibility of the participant, parents and or legal guardians.

Membership dues must be paid and in current standing in order for your daughter to participate.

A parent must attend one of the registration dates for a mandatory meeting.

Assumption for Risk, Waiver and Release:

We, the parents or legal guardians, certify that we have read the registration and the Participation Agreement thoroughly and completely and the information on this form and the registration form is true, accurate and complete. As parents/ guardians, we understand that this program is a youth softball program and as such involves certain risks of injury to the participants. Having in mind the risk of injury, we as parents/guardians do hereby agree to assume all responsibility for the illness injury or injuries sustained by: _____ (players name) while participating, playing, being transported or involved in any activities under the jurisdiction of the Cardinal Power Association. We also agree to INDEMNIFY AND HOLD HARMLESS the Fairmont Public and Parochial School Systems, City of Fairmont, Gemini Studios, Hands Park Operations, Bruce and Shelly Abitz, Cardinal Power Association from any and all damages or injuries while participating in any activity initiated by the Cardinal Power Association. You as parent/guardian also authorize the use of my daughter's picture and/or name in any and all publications, newspapers, web site or promotional items published and sponsored by the Cardinal Power Association.

Authorization: If my daughter requires emergency medical care while participating in any activity of the Cardinal Power Association and you the parent/guardian are not available, I then authorize a representative of the Cardinal Power Association to make emergency care decisions for me and to give any medical provider the information below.



Please Complete the following:

Medical Insurance Company/Carrier/Plan Name _____

Group/Policy Number _____

Special medical needs _____

Acknowledgment: I hereby acknowledge that I have carefully read and fully understand the registration form along with the Participation Form and fully accept the responsibilities and risks involved while participating in activities and events of the Cardinal Power Association and I freely and voluntarily sign this participation agreement and registration form for my daughter to participate.

Date: _____ Signature of Parent or Legal Guardian _____

* Please make a copy for your records

