## **East Limestone Athletic Association Baseball/Softball Signup Form**

Child's First Name:	Last Name:	
Date of Birth: Gende	r: Male Female	School Child Attends:
Address:		
		me:
Mom's Email:	Dad's Em	ail:
Mom's Primary Phone:	Dad's Pri	mary Phone:
Mom's Secondary Phone:	Dad's Se	condary Phone:
Has the child played this sport before? Yes No Previous years of experience?		
Played last year? Yes NoIf yes, who was the coach?		
Special Requests (NOT Guaranteed):		
Practice Limitations (NOT Guaranteed):		
As a parent or guardian, would you be willing to Coach or Assist?		
Are there any medical conditions that the Coaches of ELAA need to be aware of? Yes No		
If yes, please explain:		
My signature below certifies that I am the parent or legal guardian of		
DO NOT WRITE BELOW THIS LINE		
Payment method: Cash Check #	Amount Paid:_	Number of players paid for?
Child will play in the following age group	:	NOTE: In the event that there are
<u>Baseball</u> <u>S</u>	oftball	insufficient coaches for the
4 (D-League) 6	U	number of players in an age group and additional coaches cannot be
5/6 8	U	found, teams will be drafted by the
7/8 1	0U	coaches that are available with
9/10 1	2U	any players not drafted being
11/12 1	4U	refunded their signup fee.

**ELAA Officer** 

**Date**