

**FOR LEAGUE USE ONLY**  
 Payment Method:  
 Interac / Cheque / Cash /  
 PayPal \_\_\_\_\_  
 Team Assignment \_\_\_\_\_  
 Player # \_\_\_\_\_  
 Spouse Player # \_\_\_\_\_

27 Cloverfield Street  
 Courtice ON L1E 1K5  
 (905) 579-5332  
 www.desafunleague.ca



# DESA FUN LEAGUE

1000' ADULT 4 PITCH

Make Cheques payable to:

**Durham East Softball  
 Association - Adult Division**

## 2011 ADULT LEAGUE REGISTRATION Player Registration Fee \$110

**No refunds after April 1st, 2011.**

(Please fill in the blanks or circle given options where appropriate)

Player's Name: \_\_\_\_\_

Sex:  Male  Female      Date of Birth: \_\_\_\_\_  
MMM / DD / YYYY

Players must be 28 years of age on or before the first game of the season. Please the League Rules on our website for details and exceptions.

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: ON Postal Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_ E-mail: \_\_\_\_\_  
{ ### - ### - #### }

I am registering as part of a couple:  Yes  No **If Yes**, Spouse's Name: \_\_\_\_\_

Shirt Size:  S  M  L  XL  2XL  3XL      Shirt Number Requested: \_\_\_\_\_

I have played Softball: \_\_\_\_\_ years. (0 for no experience) Leagues I have played for: \_\_\_\_\_

I have experience in the following positions:  Pitching  Backcatching  Infield  Outfield Other \_\_\_\_\_

Approximate Skill Level:  I am new to the game       I am a below average player  I am an average player  
 I am an above average player       I am a highly skilled player

I am a returning DESA player:  Yes  No

**If Yes**, Would you like to be assigned to the same team?  Yes  No

**What Team did you play for:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Team 1 Red Eyes (Jamie Wade)       | <input type="checkbox"/> Team 2 White Lightning (Phill Murray)     | <input type="checkbox"/> Team 3 Swingers (Julie Hoogkamp)      |
| <input type="checkbox"/> Team 4 Royals (Sergio Torchia)     | <input type="checkbox"/> Team 5 Grey's Anatomy (Heather Nicholson) | <input type="checkbox"/> Team 6 Black Socks (Christine Curran) |
| <input type="checkbox"/> Team 7 Eagles (Mike Hicks)         | <input type="checkbox"/> Team 8 Cougars (Sean Roder)               | <input type="checkbox"/> Team 9 BowmanVillains (Daryl Andrews) |
| <input type="checkbox"/> Team 10 Green Machine (Ryan Burge) | <input type="checkbox"/> Team 11 Bow Sox (Justin Mace)             | <input type="checkbox"/> Team 12 Purple Haze (Steven Cooke)    |

**If No**, How did you hear about our League?  Posted Flyer (Tell us where)  Kijiji Ad  On Site Registration  
 Word of mouth (please tell us who)  Through the DESA Kids League  
 Facebook Group  Other \_\_\_\_\_

I would like to be on a team with these other people: \_\_\_\_\_

*Note: While we try to accommodate special requests, the final decision will be that of the Registration Committee*

I am willing to be a call-up player:  Yes  No

**If Yes**, Please provide a Sunday afternoons Phone/Cell Telephone #: \_\_\_\_\_  
{ ### - ### - #### }

In order to help us choose an appropriately sized venue, please let us know if you plan to attend our Year End Banquet on  
 October 1<sup>st</sup>, 2011:       Yes       No       Maybe

**Call Up Player Pool**

You have the option to be called up on a per-game-basis to play a 2nd game for another team playing at a different time if they are short players. Because this is a Fun League we would expect that call up players be willing to give their all no matter what team they are playing for! Check the rules for more specifics. If you love to play and want the opportunity to get in more games then be sure to check that box!!

*See over...*

I have health issues that DESA should be aware of:  Yes  No

If Yes, Please list them: \_\_\_\_\_

We are seeking volunteers. DESA is a non-profit, community based organization that relies on volunteers to help keep the league running as efficiently and inexpensively as possible. We need your help!

I would like to volunteer for the Executive Committee:  Yes  No

I would like to volunteer to be a Team Captain:  Yes  No

I can help in another way: \_\_\_\_\_

*The League recommends the use of Softball Cleats by all players. (No metal cleats permitted)  
The use of a Batting Helmet is left to the player's discretion.*

***I, the undersigned, will obey all DESA Fun League and Durham East Softball Association rules and regulations and confirm that I am in good health and am able to participate in softball. I also do hereby release and save harmless DESA Fun League and Durham East Softball Association, and its directors, officers, employees, volunteers, agents, representatives and participants from all claims for loss, injury to persons and property however caused, while participating in activities and sports offered by DESA Fun League and Durham East Softball Association, which I, or any person claiming through me or on my behalf, may at any time have, arising out of or connected with the operation of the said activities. I also give my permission for the free use of my name and image in broadcast, telecast or other media account of the event/activity and for the promotional purposes of DESA Fun League and Durham East Softball Association.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_