

REGISTRATION FORM  
**PONSONBY RECREATION CLUB INC.**

*mailing c/o Joe Harris*

197 Ellenville Cres Ariss, ON, N0B1B0 519-827-1731 – [ponsonbyrecclub@gmail.com](mailto:ponsonbyrecclub@gmail.com)

[www.ponsonbysoftball.ca](http://www.ponsonbysoftball.ca)

Player's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Township: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Birth Registration #: \_\_\_\_\_

eg 82-05-123456

**NOTE: Waiver/Release:** I as parent/guardian release Ponsonby Recreation Club Inc. from all claims for damages arising from any incident, including injury or property damage caused by or arising from participation of the applicant herein during any program or in any facility where a program is being held.

I as parent/guardian give permission to the Club to post photos and or stories about my child/team on the Club's website, newsletters or facebook. **Yes/no circle one.**

As parent/guardian I would like to help the Club by:

Coaching/Assistant/Manager (circle) \_\_\_\_\_ Park Maintenance \_\_\_\_\_

Concession Booth Help \_\_\_\_\_ Scorekeeping \_\_\_\_\_

BBQ'ing at tournaments \_\_\_\_\_ Fundraising \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

**Parent/Guardian (please print)** \_\_\_\_\_

Team Registering this current season \_\_\_\_\_ Fee: \_\_\_\_\_ Cash/Cheque/e-transfer(circle one)  
e-transfer to [ponsonbyrecclub@gmail.com](mailto:ponsonbyrecclub@gmail.com)