



# Player Registration Form

New Player

Returning Player

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Birthday: \_\_\_\_\_

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

City, St ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_

Mother: \_\_\_\_\_ Father: \_\_\_\_\_

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

Draft

Shirt Size YS YM YL YXL AS AM AL AXL

Short Size YS YM YL YXL AS AM AL AXL

Sock Size S M L

Notes or Requests? \_\_\_\_\_

Is your daughter a Pitcher?  Years Pitching: \_\_\_\_\_

Average Innings Per Game: \_\_\_\_\_

Is your daughter a Catcher?  Years Catching: \_\_\_\_\_

Questions can be e-mailed to: [registrations@dycgirlssoftball.com](mailto:registrations@dycgirlssoftball.com)  
For more information, visit our website at: [www.dycgirlssoftball.com](http://www.dycgirlssoftball.com)