



2026 REGISTRATION

P / M / J

Clarington Girls Slo-Pitch Association
243 King St. E.
Bowmanville Mall RPO, P.O. Box 23028
Bowmanville, Ontario L1C 3X1
www.claringtongirlsslopitch.com

Please print clearly
PLAYER'S NAME: _____

ADDRESS: _____ CITY: _____ POSTAL CODE: _____

TELEPHONE#: _____ CELL#: _____

NAME OF INDIVIDUAL WHO OWNS CELL#: _____

EMAIL: _____ PLAYER DATE OF BIRTH: _____

Have you previously participated with Clarington Girls Slo-Pitch Association? YES NO

You may make ONE request, however, there is NO GUARANTEE we will be able to honour your request
Requests are honoured on a first come first served basis: _____

REGISTRATION FEE:

PEEWEE \$110 Early Bird (until December 31, 2025) / **\$145** (until April 17, 2026) / **\$160** (After April 18, 2026)

MIDGET / JUVENILE \$145 Early Bird (until December 31, 2025) / **\$160** (until April 17, 2026) / **\$185** (After April 18, 2026)

Cash, e-transfer or Cheque (Made payable to: Clarington Girls Slo-Pitch Association)

NSF Cheques will be subject to an administration fee of \$40 **NO REFUNDS AFTER APRIL 30, 2026**

E-MAIL FORM to: president@claringtongirlsslopitch.com / **E-TRANSFER to:** administrator@claringtongirlsslopitch.com

CODE OF CONDUCT:

1. I, the Parent/Legal Guardian of the above noted player do hereby consent to allow her to play in the Clarington Girls Slo-Pitch Association and accept the responsibility to return any and all league equipment, and waive any claim whatsoever against the League or its officers for any injuries.
2. I/We will promote good sportsmanship on and off the field.
3. I/We will keep my/our expectations realistic.
4. I/We will be on time for all practices and games.
5. I/We will not be a "Behind the bench" coach or umpire.
6. I/We will not yell at, argue with, harass, or abuse the Umpires, Coaches, Parents, Players or Executive members.

I understand that should the situation arise where I have been found to be breaking this agreement, and after investigation by League Officials, I may not be permitted to attend my child's game(s). In the event that this agreement continues to be broken, my child may not be permitted to play in the Clarington Girls Slo-Pitch Association and no refund will be provided.

When signing this form, you are responsible for anyone that you bring to the game with you in making sure that they also abide by this agreement.

I understand that from time to time there is opportunity, and I give permission for Clarington Girls Slo-Pitch Association, to publish photographs highlighting player's accomplishments through the local paper, the Clarington Girls Slo-Pitch Association website and/or Facebook page. No names will be published by the league.

PLAYER'S NAME _____ PLAYER'S SIGNATURE _____ DATE _____

PARENT'S NAME _____ PARENT'S SIGNATURE _____ DATE _____

Would you like to: SPONSOR A TEAM COACH ASSISTANT COACH

NAME: _____ PHONE#: _____

Mandatory police check is required for volunteers over 18 years of age

Office Use Only:

DATE RECEIVED: _____ TIME RECEIVED: _____ PAID: **CASH / CHEQUE / E-TRANSFER**