

# BRUNSWICK COUNTY DIXIE SOFTBALL

## BELLES AND DEBS REGISTRATION

REGISTER DECEMBER 1<sup>ST</sup> – FEBRUARY 24<sup>TH</sup>

8:30 a.m. till 5:00 p.m. Monday – Friday. Building M Government Complex

### DIXIE BELLES 13-15 YEARS OLD

ANYONE WHOSE SIXTEENTH 16<sup>TH</sup> BIRTHDAY FALLS ON OR AFTER JANUARY 1<sup>ST</sup> OF 2012 SHALL BE ELIGIBLE TO COMPETE IN AND COMPLETE THE CURRENT DIXIE BELLES SEASON.

### DIXIE DEBS 16-19 YEARS OLD

ANYONE WHOSE NINETEENTH 19<sup>TH</sup> BIRTHDAY FALLS ON OR AFTER JANUARY 1<sup>ST</sup> OF 2012 SHALL BE ELIGIBLE TO COMPETE IN AND COMPLETE THE CURRENT DIXIE DEBS SEASON.



NEED A COPY OF BIRTH CERTIFICATE AND PARENT OR GUARDIAN TO REGISTER.

BIRTH CERTIFICATE IS MANDATORY

**REGISTRATION FEE IS \$50.00**



## STATE CHAMPIONS

### BELLES

2003 – 2005

### DEBS

2006 – 2008 – 2009



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[www.brunSCO.net](http://www.brunSCO.net)

2003  
DIXIE BELLES  
STATE  
CHAMPIONS  
BRUNSWICK NORTH



2005  
DIXIE BELLES  
STATE  
CHAMPIONS  
BRUNSWICK NORTH



2006  
DIXIE DEBS  
STATE  
CHAMPIONS  
BRUNSWICK NORTH



2008  
DIXIE DEBS  
STATE  
CHAMPIONS  
BRUNSWICK WEST



2009  
DIXIE DEBS  
STATE  
CHAMPIONS  
BRUNSWICK WEST



**Office Use Only**

**Paid**

**Birth Certificate**

**Receipt #** \_\_\_\_\_

**ATHLETIC REGISTRATION FORM**

Brunswick County Parks & Recreation Department

**NAME:** \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

**BIRTHDATE:** \_\_\_\_\_ **AGE:** \_\_\_\_\_  
(MONTH) (DAY) (YEAR)

**PHYSICAL ADDRESS:** \_\_\_\_\_  
(STREET)

(CITY) (ZIP)  
**PHONE:** ( ) \_\_\_\_\_ **EMERGENCY:** ( ) \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ @ \_\_\_\_\_ .

**SCHOOL:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_ **PREVIOUS TEAM:** \_\_\_\_\_

**PLEASE LIST ANY PHYSICAL PROBLEMS THAT MAY LIMIT PARTICIPATION:**

\_\_\_\_\_

**(FORM MUST BE FILLED OUT COMPLETELY WITH BIRTH CERTIFICATE & FEE PAID TO BE ELIGIBLE)**

IT IS NOT GUARANTEED THAT YOUR CHILD WILL BE ON THE SAME TEAM AS LAST YEAR.

YOUR CHILD **MUST** PLAY DIXIE SOFTBALL WHERE SHE PLAYED DIXIE YOUTH SOFTBALL. IF THERE IS NOT A TEAM FROM THAT LEAGUE, SHE WILL BE ABLE TO PLAY FOR THE NEXT CLOSEST TEAM IN THE AREA.

AS A PARENT OR GUARDIAN, I GIVE MY CONSENT FOR THE ABOVE NAMED TO PARTICIPATE IN THIS ACTIVITY. I THEREFORE RELEASE BRUNSWICK COUNTY PARKS AND RECREATION, THE BRUNSWICK COUNTY YOUTH LEAGUE, ITS OFFICERS, EMPLOYEES OR AGENTS, FROM ANY AND ALL LIABILITY AND RESPONSIBILITY FOR ANY ILLNESS, INJURY, ACCIDENTAL DEATH OR DAMAGE TO PERSONAL PROPERTY SUSTAINED IN THE ABOVE ACTIVITY.

**EQUIPMENT:**

AS A PARENT OR GUARDIAN, I ASSUME ALL RESPONSIBILITY FOR ANY UNIFORM / EQUIPMENT THE ABOVE PARTICIPANT RECEIVES FOR THIS PROGRAM. NO ALTERATIONS TO ANY UNIFORM OR EQUIPMENT ARE ALLOWED. UNIFORM / EQUIPMENT MUST BE RETURNED BY THE LAST GAME OR EVENT OF THIS PROGRAM OR I WILL PAY FOR THE UNIFORM / EQUIPMENT.

**PARENTAL MEDICAL TREATMENT AUTHORIZATION:** In the event of injury to MY/OUR child, I/WE hereby grant authority to a qualified paramedic/physician to render such medical treatment as said paramedic/physician deems necessary under the circumstances.

**PICTURE CONSENT FOR FILM / WEBSITE / ADVERTISEMENTS:** I/WE give permission to have my child's picture on the BCP&R/league web site, program advertisements, video for purposes of televising games and any other medium used strictly to promote Brunswick County Dixie Baseball.

\_\_\_\_\_  
**PARENT OR GUARDIAN**

\_\_\_\_\_  
**DATE**

**DIXIE YOUTH LEAGUE PLAYED FOR:**

Leland  Town Creek  Southport-Oak Island  Lockwood Folly  Shallotte  Waccamaw

Have You Moved?  Yes  No Where: \_\_\_\_\_

Do You Want To Play In New Location Where You Moved?  Yes  No