

# Woodbridge Senior Softball Club Registration for 2025 Season

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: \_\_\_\_\_

Primary Physician \_\_\_\_\_ Phone: \_\_\_\_\_ Health Ins. Provider \_\_\_\_\_

Hospital of Choice (in event of injury): \_\_\_\_\_

Existing Medical Conditions: \_\_\_\_\_

Emergency Medicines: \_\_\_\_\_

If you become injured and require a doctor's attendance, you will need to provide a medical release from your doctor to continue playing this season.

---

## Please complete all that apply:

☐ Diamond Gals: Position – 1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

☐ Silver Sluggers: Position – 1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

☐ I am interested in Co-Ed play: Position – 1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

Will you be playing Saturday only? Yes \_\_\_\_ No \_\_\_\_

Will you be able to run from home plate to 1<sup>st</sup> base? Yes \_\_\_\_ No \_\_\_\_

Will you need a courtesy runner from 1<sup>st</sup> base? Yes \_\_\_\_ No \_\_\_\_

If pitcher is not your 1<sup>st</sup> or 2<sup>nd</sup> choice of position, would you be willing to pitch if safety equipment was provided? Yes \_\_\_\_ No \_\_\_\_

Will you be away for a total of more than 2 weeks during the season? Yes \_\_\_\_ No \_\_\_\_

If yes to the previous question. The first half \_\_\_\_\_ (Apr. – June) The second half \_\_\_\_\_ (Aug – Sept)

Do you play for a tournament team? Yes \_\_\_\_ No \_\_\_\_ If yes, which one? Renegades \_\_\_\_ Wolverines \_\_\_\_  
Wildcats \_\_\_\_ Other \_\_\_\_

Volunteers Needed: \_\_\_\_ Umpires \_\_\_\_ Announcer's Booth \_\_\_\_ Media – Photography/Website  
\_\_\_\_ Field Maintenance \_\_\_\_ Snack Bar \_\_\_\_ BBQ Chef

## Comment:

---

*Registration forms may be picked up at the clubhouse or downloaded from the silver sluggers web site. Forms may be returned to the clubhouse or attached to an email to Melba Starr (melba.starr@comcast.net)*

---

To be included in the team selection process, your registration, along with your waiver must be submitted by February 15, 2025 by 10:00 AM New players will be required to attend at least 2 of the Winter Sandlot Softball sessions