



PAGE ATHLETIC & RECREATION ASSOCIATION (PARA) 2021 SPRING SOFTBALL FREEZE FORM

PLEASE USE EXACT NAME THAT IS ON THE CHILD'S BIRTH CERTIFICATE

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|-------|--|---------------|---|----------|---|--|--|
| CHILD | FIRST NAME ▶ | | MIDDLE NAME | | LAST NAME ▶ | | JR, SR, etc. ▶ |
| | GENDER <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE | DATE OF BIRTH | MONTH ▶ | DAY ▶ | YEAR ▶ | PARA RETURNER? <input type="checkbox"/> YES <input type="checkbox"/> NO | HEAD COACH OF TEAM TO BE FROZEN BY ▶ |
| | SOFTBALL LEAGUE (AGE ON 12/31/2020) ▶ | | 8U AGES 5, 6, 7 & 8 <input type="checkbox"/> | | 10U AGES 9 & 10 <input type="checkbox"/> | | 12U AGES 11 & 12 <input type="checkbox"/> |

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| TO BE COMPLETED BY PARENT / LEGAL GUARDIAN | I attest the above answers are correct to the best of my knowledge and I hereby give permission for the above named head coach to freeze my child for the 2021 PARA Spring Softball season. I further attest that this freeze form is not considered official until signed by PARA Softball VP, and PARA Softball VP has authority to reject any freeze application. | |
| | <div>_____ PLEASE PRINT PARENT OR GUARDIAN NAME</div> <div><input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Legal Guardian</div> | |
| | <div>_____ SIGNATURE OF PARENT OR LEGAL GUARDIAN</div> | <div>_____ DATE OF SIGNATURE MM/DD/YYYY</div> |

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| TO BE COMPLETED BY HEAD COACH | Head coach is advised to discuss potential team freezes with PARA Softball VP prior to completing form to ensure there are no unforeseen issues. | |
| | I attest that I am choosing to freeze the above named player and acknowledge that I have not exceeded the maximum number of six (6) freezes as allowed under PARA Softball rules. I further attest that freeze form is not considered official until signed by PARA Softball VP, and PARA Softball VP has authority to reject any freeze application. | |
| | <div>_____ PLEASE PRINT HEAD COACH NAME</div> <div>_____ SIGNATURE OF HEAD COACH</div> | <div>_____ DATE OF SIGNATURE MM/DD/YYYY</div> |

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| PARA USE ONLY | <div>_____ SIGNATURE OF PARA SOFTBALL VP</div> <div>_____ DATE APPROVED MM/DD/YYYY</div> | |
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