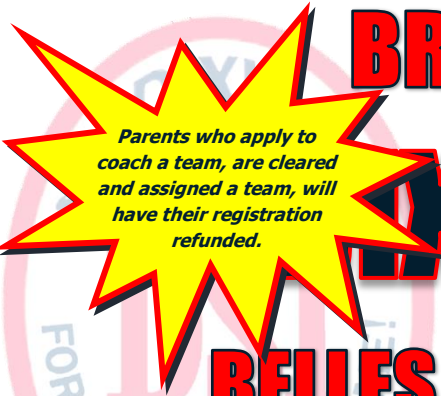


# BRUNSWICK COUNTY



# DIXIE SOFTBALL

COVID-19 STATE GUIDELINES WILL APPLY

## BELLES AND DEBS REGISTRATION REGISTER JANUARY 30<sup>th</sup>, 2021 – MARCH 5<sup>th</sup>, 2021

8:30 a.m. till 5:00 p.m. Monday – Friday. Building G, Government Complex / REGISTER ONLINE @ <http://bcparks.recdesk.com/>

### Dixie Belles 13-15 years old

Any girl that turns 16 years of age on or after August 1 of the current calendar year is eligible to compete in and complete the current Belles playing season.

Player's will be allowed to play up as long as they register by the cut-off date March 5<sup>th</sup>, 2021.

### Dixie DEBS 16-19 years old

Any girl that turns 20 years of age on or after August 1 of the current calendar year is eligible to compete in and complete the current Debs playing season.

Players registering after March 5<sup>th</sup>, 2021 will be placed on a Waiting List!

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

**\*\*\*\*BIRTH CERTIFICATE & PROOF OF RESIDENCY IS MANDATORY\*\*\*\***

**REGISTRATION FEE IS \$50.00**



## STATE CHAMPIONS



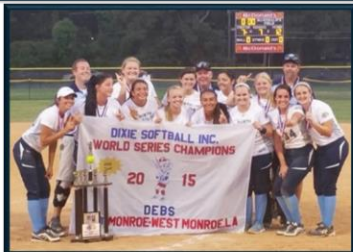
**BELLES**  
**2003-2005**  
**DEBS**



**2006 – 2008 – 2009 -**  
**2013 – 2014 – 2015 - 2019**

## 2015 DEBS

## WORLD SERIES CHAMPIONS



CONTACT PERSON – TANYA MCGEE @ 910.253.2670 or

[tanya.mcgee@brunswickcountync.gov](mailto:tanya.mcgee@brunswickcountync.gov)

Mail to:

BRUNSWICK COUNTY PARKS & RECREATION/P.O. BOX 249-BOLIVIA, N.C. 28422

FAX: 910.253.2684

Register Online at: <http://bcparks.recdesk.com>

<b>2003</b> DIXIE BELLES STATE CHAMPIONS BRUNSWICK NORTH	<b>2005</b> DIXIE BELLES STATE CHAMPIONS BRUNSWICK NORTH	<b>2006</b> DIXIE DEBS STATE CHAMPIONS BRUNSWICK NORTH	<b>2008</b> DIXIE DEBS STATE CHAMPIONS BRUNSWICK WEST	<b>2009</b> DIXIE DEBS STATE CHAMPIONS BRUNSWICK WEST
<b>2013</b> DIXIE DEBS STATE CHAMPIONS BRUNSWICK WEST	<b>2014</b> DIXIE DEBS STATE CHAMPIONS BRUNSWICK WEST	<b>2015</b> DIXIE DEBS STATE CHAMPIONS BRUNSWICK WEST	<b>2019</b> DIXIE DEBS STATE CHAMPIONS BRUNSWICK NORTH	

**2015 DIXIE SOFTBALL INC.  
DIXIE DEBS WORLD SERIES CHAMPIONS**



**Office Use Only**

**Paid**

**Birth Certificate**

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

**ATHLETIC REGISTRATION FORM/DIXIE SOFTBALL**

Brunswick County Parks & Recreation Department

**(MANDATORY DOCUMENT SHOWING PROOF OF RESIDENCY MUST BE TURNED IN. I.E., CURRENT BILL, LICENSE, ETC. & MUST MATCH PHYSICAL ADDRESS)  
COPY of BIRTH CERTIFICATE MUST BE TURNED IN, ALONG with PROOF of RESIDENCY & PAYMENT MADE TO BE REGISTERED!  
ALL DOCUMENTATION MUST BE TURNED IN TO BE ELIGIBLE!**

**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.

I/WE, the Parents/Guardians of the above named candidate for a position on any of the Dixie Softball, Inc. teams, hereby give MY/OUR approval to her participation in any and all Dixie Softball, Inc. during the current season. I/WE assume all risks and hazards incidental to such participation including transportation to and from such activities, and I/WE do hereby waive release, absolve, indemnity and agree to hold harmless the Brunswick County Parks & Recreation, Dixie Softball, Inc. League and its Associations, the sponsors, supervisors, participants, volunteers and persons transporting MY/OUR child to and from activities for any claim arising out of illness, injury, accidental death or damage to personal property sustained in the above activity to MY/OUR child. I/WE and participant agree to abide by the Dixie Softball, Inc. Rules of Conduct.

**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. LOANED EQUIPMENT MUST BE RETURNED BY THE LAST GAME OR EVENT OF THIS PROGRAM OR I WILL PAY FOR THE 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.

**PLEASE MAIL COMPLETED FORM TO: BCP&R ~ ATTN: TANYA MCGEE ~ P.O. BOX 249 ~ BOLIVIA, NC 28422**  
**FAX: (910) 253-2684 (REGISTRATIONS MUST BE COMPLETED & SIGNED/FEE PAID/& A COPY OF PARTICIPANTS BIRTH CERTIFICATE RECEIVED BEFORE ANY PARTICIPATION CAN BEGIN.) I/WE have read the above and agree and understand the policies set forth above**

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

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

**DIXIE YOUTH SOFTBALL 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