



PARENTS CONSENT
BETH - WOOD "B" TOURNAMENT TEAM
ALL STARS

I / we would like our son / daughter to participate in the **Beth - Wood** "B" Team All Stars (10U's or 12U's) for the 2021 Season :

Player's Name : _____

DOB : _____ (*Age : ____)
* As of April 30, 2021

Address : _____

2021 **B - W**
Team Name : _____

Telephone Number : _____

2021 **B - W**
League Division : _____

As Parent(s) of _____, I / we have read the **Beth - Wood** 2021 All Star Policies and will fully comply with criteria / rules contained in same with no exceptions. I / we also hereby confirm that our son / daughter will not miss **more than a total of (14) days** of All Star play due to vacation or otherwise as noted in said Policies. I / we agree to pay **Beth - Wood** an initial cost of \$ 225. for costs incurred for the All Star Team our son / daughter is selected for, as outlined in the Policies; we also agree to pay any balance if said costs exceed \$ 225. / Player. Failure to strictly abide by these Policies will cause our son / daughter to be terminated off this Team, if selected, and may result in his / her **not** being able to participate in the 2022 **Beth - Wood** All Star Season as well.

Signed : _____

Date : _____ /2021

Parent's Name : _____

{Please Print}