NORTH TAMPA BAY SENIOR SOFTBALL, INC.(NTBSS)

PLAYER REGISTRATION FORM – 2026-2027 SEASON

PERSONAL INFORMATION

Name:_____
Last First Like To Be Called

Address:_____
Street Address

_____
City State Zip Code

Contact Number(s)(HOME)_____(CELL)_____

Shirt Size: **CIRCLE ONE:** S M L XL 2XL 3XL ALREADY HAVE 2 SHIRTS?-**CIRCLE** – YES OR NO

E-mail Address **PRINT CLEARLY:**_____

Date of Birth:_____ Age Today:_____

First Emergency Contact:_____1st Contact Number:_____
If needed:
Second Contact:_____2nd Contact Number:_____

Any extended away time planned? YES or NO. Dates or number of Fridays you may miss:_____
_____
If you are currently out of town, enter **DATE** you will be back in town to play ?_____

PREFERENCES

What softball position(s) do you play? (Used for the draft):
_____
_____

Signature verifies you have received, read, signed Player's contract, Waiver/Release of Liability, provided proof of age if requested, I acknowledge that NTBSS is associated with Parks, Recreation and Natural Resources of Pasco County, and will abide by the rules and regulations thereof. I further acknowledge and agree to abide with current NTBSS Rules and Senior Softball USA (SSUSA. ***NTBSS IS AN INVITATIONAL LEAGUE.***

$80.00 dues - cash, money order, check (payable to **NTBSS, Inc**.) and/or mail to: Jeff Holden, 11434 Bathgate Ct., New Port Richey, FL 34654

SIGNATURE_____ DATE_____-