FASTPITCH HEADQUARTERS

Parental Consent Form

(For Players under 13 year olds)

INSTRUCTIONS: Please print out this page and complete the information below. Then, the parent/guardian must sign their name at the bottom of the form and fax it to **FASTPITCH HEADQUARTERS**, **INC**. at 954-252-9063, or scan and email it to parentalconsent@fastpitchheadquarters.com.

When **FASTPITCH HEADQUARTERS** receives and processes your consent form (which will be done immediately upon receipt of form), we will accept your child's information from her team or tournament. This will then allow your child's information to be viewed in the online Team or Tournament Profile. If you have any additional questions, please email us at support@fastpitchheadquarters.com.

I,	(p	arent/guardian name), hereby cert	ify that I am the parent and/or
I, (parent/guardian name), hereby certify that I legal guardian of (player My child's email address is:			_(player name).
My child's email address is:			and
	her bir	thdate is from	
My child's team is	S	from	(City State).
HEADQUARTERS since	ce she is under 13 ournament Profile	s. FASTPITCH HEADQUART	ay be used when submitted by her
	*	First and Last Name	
	*	Email Address	
	*	Phone Number	
	*	Team Name	
	*	City and State	
	my child's athleti	c and academic history and will b	include contact information, as well be posted online in a secured
	J ARTERS' Mem		neld in accordance with y and not be disclosed to any third
	PITCH HEADQ	UARTERS to collect, use and di	ERS Member Agreement, and I give sclose personal information about
		Parent's	Signature

Date