



CCA MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name of the Player:

Date of birth:

Gender:

M

F

Current address:

City:

ZIP Code:

Home Phone:

Name of Sibling (if enrolling in annual program):

Sibling's Date of Birth:

Sibling's Gender:

M

F

PARENTS' INFORMATION

Mother's Name:

Father's Name:

Mother's E-mail:

Father's E-mail:

Mother's Cell Phone:

Father's Cell Phone:

PREFERRED CLASS LOCATION

CUPERTINO

EVERGREEN

FREMONT

EMERGENCY CONTACT

1

Name:

Phone:

2

Name:

Phone:

EMPLOYERS INFORMATION (FOR THE SOLE PURPOSE OF SECURING COMPANY MATCHING FUNDS)

Name of Mother's Employer:

Name of Father's Employer:

PLEASE SELECT HOW YOU WOULD LIKE TO VOLUNTEER AT CCA

Scoring

Data Entry

Umpiring

Fund Raising Help

Ground Manager

Communications In-charge during tournaments

Team Manager

Creating Flyers/Newsletters

Team Mom/Dad

Coaching Help (for practice sessions, games)

HOW DID YOU HEAR ABOUT CCA'S COACHING PROGRAMS?

Magazine Ad

School Flyers

From a Friend

Local Email groups

Other: _____

LIABILITY WAIVER – MUST READ AND SIGN

I assume all responsibility and agree to indemnify any and all concerned authorities, school districts & organizations for any loss, damage or injury to myself or my child or my property which may have been caused during the class by accident, or negligence, or any act, of any person connected in any way with this event. I understand that the California Cricket Academy/City of Cupertino/City of Fremont/City of San Jose or the related School Districts do not guarantee the construction, condition, or safety of the facilities or the equipment and that this release agreement is to be binding on me, my heirs and assigns. I have read the above, understand it's meaning and voluntarily sign it.

SIGNATURES

Signature of Parent/Legal Guardian of the applicant:

Date:

CLASS/PAYMENT INFORMATION

Applicant Enrolled in following batch:

Amount Paid:

Check Number: