

2026 Spring Softball Registration

Deadline: February 13

Player Name: _____ Parent/Guardian Name: _____

Player's Gender: _____ Player's Date of Birth: _____ Notable Medical Conditions: _____

Street Address: _____ City: _____ Zip Code: _____

E-Mail Address: _____ Phone: _____ (H) _____ (C)

Grade: _____ Age on Jan. 1, 2026: _____ School: _____

Years of Softball Experience _____ Coach Last Year (If at WNSL): _____

Teammate Requests: _____

Coach Request: _____ Are You on This Coach's Roster? __ Yes __ No __ Don't Know

Please Select Your Preferred Competition Level: Recreational _____ Competitive _____ Don't Know _____

Division I am Registering My Player For (circle one):

6U (5&6s) 8U (7&8s) 10U (9&10s) 12U (11&12s) 14U (13&14s)

Circle Jersey Size (If you are in between sizes, order up):

YS(6 - 8) YM(10 - 12) YL(14 - 16). AS(30 - 32) AM (34 - 36) AL (36 - 38) AXL(40 - 42) AXXL (42---44)

Select Pants Size (Pants Run Small. If you are in between sizes, order up):

YS(24 - 26) YM(28 - 30) YL(32 - 34) AS(28 - 30) AM(32 - 34) AL(36 - 38) AXL(40 - 42) AXXL (42 - 44)

Preferred Name on Back of Uniform (First Name, Last Name or Nickname): _____

Volunteer Information:

I am willing to volunteer in this league as a: _____ Coach _____ Assistant Coach _____ Team Parent

Contact information if different from above (Name, E-Mail, Phone): _____

Sponsorship Information: Check here if you are willing to be your team's sponsor for \$250 _____

Coach of team: _____ Company Name: _____ (Please email a .jpg logo to carly@wnsl.net)

Agreement:

1. I hereby certify that my child is in normal health and capable of safe participation in the WNSL Spring Softball Program. I assume all risk and hazards incidental to the conduct of this program.
2. I hereby authorize the WNSL to obtain medical treatment for my child if the parent(s) cannot be reached.
3. I support the WNSL philosophy based on character development, participation, fun, skill development, teamwork, fair play, family involvement and growth in spirit, mind & body.
4. I will read and follow the WNSL's code of conduct online at www.wnsl.org
5. I understand league fees cover the uniform, equipment, umpires, field care and administrative fees for the regular season only. Additional fees will be assessed for All-Star travel teams and interleague or tournament fees
6. I acknowledge that if I choose to withdraw my child from the league there will be NO REFUNDS will be given, unless it is for medical reasons. Registration fees can be transferred to a different sport up until the time that uniforms are ordered. Once uniforms have been ordered, no transfers will be available.

Signature of Parent/Guardian: _____ Date: _____

If registering by mail, cost for this league is as follows:

6U - \$185 8U - \$225 10U - \$285 12U - \$285 14U - \$285

To complete your registration, please mail this form along with a check for the correct amount listed above (plus sponsorship if you selected that option) to:

WNSL, P.O. Box 50710, Nashville, TN 37205