



## DISABILITY SERVICES RESOURCE CENTER (DSRC)

# ACES<sup>SM</sup> (All Children Experience Sports)

## SOFTBALL REGISTRATION FORM

2025 Season at Defoe Park

601 Marquette Ave., Bay City, MI 48706

July 22, 24, 29, 31, and August 2

Please fill out *one form* for each athlete and *one form* for each helper/buddy... including parent helpers.

**Registration Form and all other required forms *must* be submitted by noon on Monday, July 3, 2025!**

If you do not register in advance, you will not be able to participate this year.  
Please do not show up on game night and expect to play if you haven't pre-registered.

BUDDIES: Fill out Registration Form, Release of Liability Form, ACES Code of Conduct/Rules, Media Release, AND the DSRC ACES Apparel Order Form if you want a tee-shirt and/or a hat.

ATHLETES: Fill out Registration Form, DSRC ACES Apparel Order Form, Medical Release/Health Examination Form (a copy of a completed Health Exam within one year prior to start of ACES is acceptable — must still complete Medical Release portion of DSRC's form), Release of Liability Form, ACES Code of Conduct/Rules, and Media Release.

Athletes must be at least 6 years of age to play. Buddies must be at least 12.

PLEASE PRINT NAME: \_\_\_\_\_

ARE YOU AN ATHLETE OR A BUDDY? \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

DAY PHONE: \_\_\_\_\_ EVENING PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

New jerseys and hats for ACES athletes are being designed with the new logo (similar to the one above). We would appreciate your help to cover the cost of these as there are no other costs for ACES athletes to participate. Order JERSEYS, HATS, AND ANY "SUPPORTER" TEE-SHIRTS (for parents/buddies/guardians/friends, etc.) on the enclosed DSRC ACES Apparel Order Form.

PARENT/GUARDIAN'S SIGNATURE IF ATHLETE IS UNDER 18 YEARS OF AGE: \_\_\_\_\_

PRINTED NAME OF PARENT/GUARDIAN: \_\_\_\_\_

Any additional information you think we should know: \_\_\_\_\_

Disability/Disabilities/Limitations: \_\_\_\_\_

**ADMIN USE ONLY: Date Received:**