

Softball Player Registration Form

Amount Paid: _____ Age as of Dec 31 2008 _____ Player # _____

Jr. Ponytail: (8-10 yrs) - **\$55.00** **Ponytail:** (11-13 yrs) - **\$55.00**

Check #: _____ Division _____

Jr. Olympic: (14-16 yrs) - **\$80.00** **Jr. Olympic:** (16-18 yrs) - **\$80.00**

Sandlot Softball: (entering 1-3 grade)- **\$30.00**

PLEASE FILL OUT THE INFORMATION BELOW, CLEARLY AND COMPLETELY:

PLAYERS NAME: _____ BIRTHDATE: ____/____/____
(Last) (First) (M) (D) (Y)

MAILING ADDRESS: _____
(Street) (City) (Zip Code)

HOME PHONE: _____ ALTERNATE PHONE: _____

E-MAIL: _____ SCHOOL GRADE: _____

Has this player ever signed up for Hazen Softball? Yes / No

Describe any other organized softball (other than Hazen) this player has participated in. Tell us about their experience over the last two seasons.

The two defensive positions this player has played most are? _____

Does this player have any physical disabilities or handicaps? Yes / No If yes, please describe:

Any other information the softball league should be aware of:

Shirt Size: (Circle One): Youth Medium Youth Large Adult Small
 Adult Medium Adult Large Adult X – Large

I HERBY CERTIFY THAT: I am the parent or legal guardian of the above-named player who wishes to participate in organized baseball under the auspices of the Hazen Park Board and/or the City of Hazen. I understand that softball can be a hazardous activity, which may subject participants to serious injury. Nevertheless I, on behalf of my daughter or ward, myself and my spouse, herby agree to assume all risk to which my daughter may be exposed due to his activities and participation, directly or indirectly, in connection with the Hazen Softball Program. I specifically release, absolve, indemnify and hold harmless the Hazen Softball League, the Hazen Park Board, and all officers, directors, sponsors, organizers, managers, coaches, supervisors, employees and volunteers thereof from any liability resulting therefrom.

PARENT SIGNATURE: _____ DATE: _____

