2021
WOMEN'S SOFTBALL REGISTRATION FORM

Sponsored by the Town of Southeast Recreation Department

NAME: _____ MALE: ___ FEMALE: ____
ADDRESS: _____
CITY: _____ ZIP CODE: _____
PHONE: _____ WORK #: _____ CELL #: _____

SHIRT SIZE: CIRCLE ONE: Adult S M L XL

EMERGENCY CONTACT: _____ PHONE: _____

FEE: (non-refundable & non-transferrable): _____ Check #: _____ Cash: ____

CREDIT CARD TYPE: _____ #: _____
Expiration Date: _____ Sec. Code: _____

EMAIL ADDRESS: _____

_____ agree to participate in the Southeast Recreation program. I assume all risks and hazards incidental to such participation including transportation to and from activities. I do hereby waive, release, absolve, indemnify and agree to hold harmless the sponsors and coaches for any claim arising out of an injury to my child. I also understand that it is my responsibility to notify the Recreation Department of any MEDICAL/ PHYSICAL condition that could limit my participation or that requires special attention.

PARENT/GUARDIAN SIGNATURE:_____ Date: _____

Captain: _____

List Team Members:

_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____