



Palos Power Softball In-House League 2014 Registration Form

Player's Name (First Name Last Name)	
Date of Birth (month/day/year) Birth Certificate Required	
Age on January 1st, 2014	
Division Player Eligible to Play Based on Players Age as of January 1, 2014	
Address	
Home Phone #	
Mother's Name	
Mother's E-Mail	
Mother's Mobile #	
Father's Name	
Father's E-Mail	
Father's Mobile #	
School Player Attends	

Disclaimer

I, the undersigned, as the parent or legal guardian of the child named above do hereby give my full consent and approval for my child to participate as a member of the softball team and league indicated above.

I understand that there are certain risks of damages and injuries, including death, inherent in the practice and play of softball, as well as in traveling in other related activities incidental to my child's participation, and I am willing to assume these risks on behalf of my child. These risks include but are not limited to those hazards associated weather conditions, travel, playing conditions, equipment and other participants.

I understand that sliding into base is dangerous to my child and to other players and may result in serious injury or death.

I understand that the very nature of the game of softball is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to my child and to other players.

Further, I agree that in consideration for the right to allow my child to participate as a member of team designated below and in consideration for permission to play on the fields arranged for by the team or league:

1. On behalf of my child and myself, I do voluntarily elect to accept and solely assume all risks of injury incurred or suffered by my child (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my child's team, and (c) while on or upon the



premises of any and all of the fields arranged for by my child's team or league for practice or play and (d) while participating in any team or league organized event.

2. In addition to giving my full consent for my child's participation, I do hereby release, discharge and agree not to sue the team and league designated above, the owner or operator of any field or other entity designated above, Palos Power Softball, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or Palos Power Softball for any claim, damages, costs including attorney fees, or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by my child from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released.

I hereby certify that my child is fully capable of participating in the designated sport and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as made known to coaches and officials of the team and league.

I further agree on behalf of myself and my child listed above, that I shall hold harmless and fully indemnify the parties hereby released from any and all claims, damages, costs including attorney fees, and causes of action which may arise from any cause of action made by me or by, through or on behalf of my child, even if the damages, injuries or death are caused in whole or in part by any of the persons or entities hereby released. I also give permission for media releases.

I hereby give permission to the team manager to obtain medical treatment for my minor daughter, in the event I am not available, and medical treatment is required. My signature below confirms I have read this disclaimer and agree to its provisions:

Parent or Guardian Signature: _____ Date: _____

REGISTRATION FEE (Non-Refundable after March 1th, 2014): Includes our special group wide fundraising event, uniform, jersey, shorts, socks, visor, team and individual picture.

Registration Fee	Amount/Player	Number of Players	Total Due
Bitty	\$155		
All Other Age Divisions	\$240		
Volunteer Fee/Family	N/A	N/A	\$25
Total Amount Due:			\$ _____

VOLUNTEER FEE: Please circle one of the following options below:

- In order to receive a refund of my volunteer fee, I will assist the POWER organization with a board approved event such as but not limited to field maintenance, Power Day and concessions.
- I choose not to work any volunteer time and donate my volunteer fee to Palos POWER Softball.

UNIFORM SIZES: Please circle one of the following options for jerseys and pants/shorts:

Jersey	YS	YM	YL	AS	AM	AL
Pants	YS	YM	YL	AS	AM	AL

Official League Use Only

Registered By: _____

Birth Certificate Checked: _____

Amount Paid: _____

Check #, Cash or Credit Card: _____