



Adult Softball Registration Form

Spring League

League Starts February 13th, 2012

Team Name: _____

League:

[Monday]

Women

[Tuesday/Thursday]

Men Lower

[Tuesday/Thursday]

Men Upper

[Tue/Wed/Thur/Fri]

Coed Lower

[Wednesday/Thursday/Friday]

Coed Upper

Amount: \$460 (Additional \$10 umpire fee per game applies)

Manager Name: _____

Mgr. Phone: _____ **Alternate Phone:** _____ **E-Mail:** _____

Player	Player Name	Position
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

We the above signed, hereby state that we are voluntary participants in the above stated program. By signing above, I do hereby release and forever discharge the ELINGS PARK FOUNDATION, SANTA BARBARA SOFTBALL CLUB, its DIRECTORS and its SPONSORS of and from any liabilities, claims, actions and possible causes of action whatsoever that may accrue to me or my heirs from any loss of damage and injury including death, that may be sustained by my person or property while in, at or on route into and away from said program, AND whereas, the above signed is aware of the dangerous nature of this undertaking as relates to loss of life and/or limb. THEREFORE, it is agreed as follows: that in consideration of being allowed to participate in the program, the above signed hereby voluntarily assumes all risks from accident or damage to persons or property and hereby releases the ELINGS PARK FOUNDATION, SANTA BARBARA SOFTBALL CLUB, its DIRECTORS and its SPONSORS from any claim, liability or demand of any kind for or on account of any personal injury or damage of any kind sustained or caused by negligence of the ELINGS PARK FOUNDATION, SANTA BARBARA SOFTBALL CLUB, its DIRECTORS, SPONOSORS, or otherwise. We, the above signed, further agree to abide by the rules and regulations stated in the Elings Park Code of Conduct.

MANAGER'S SIGNATURE: _____ **DATE:** _____