

Cherry City Crush Girls Fastpitch Softball

www.cherrycitycrush.com



Player Registration Form

Fees: \$125.00 per player

Covers ASA fees & Insurance

Make check payable to: Cherry City Crush

(Give check to your coach upon selection to the team)

Player Name: _____ Parents Email: _____

Address: _____ City: _____ State/Zip: _____

Home Phone: _____ Date of Birth: _____ Age as of 1/1/10: _____

Father's Name: _____ Mother's Name: _____

Father's Cell: _____ Mother's Cell: _____

Team: 10U: _____ 12U: _____ 14U: _____

If you are unable to be reached, name of person in the area who will take responsibility for your child:

Name: _____ Address: _____

Relationship: _____ Phone: _____ Cell: _____

Family Doctor: _____ Phone: _____

Medication: _____

Any allergies, medical or physical problems? YES NO

If yes, please explain: _____

Consent, Assumption of Risk and Indemnification

By signing in the space provided below, the undersigned, being either the above-named player (Player) or the parent or legal guardian of the Player, as applicable, hereby understands, acknowledges and agrees as follows:

If I am signing as the parent or legal guardian of the Player, I give consent and permission for the Player to participate with the Cherry City Crush Fastpitch Softball (CCC).

I understand, acknowledge and agree that the Players assume all the risks and hazards that are incidental to participation in the CCC program, which include, but are not limited to, practice, local municipalities, games and CCC sponsored events. I consent and give permission to the Representatives to provide medical treatment to the Player in case of emergency or injury.

I give consent and permission to CCC and its volunteers, and representatives to take and use, at their sole discretion, photographs during games, practices or CCC sponsored events; such use may include posting the photographs on the CCC website.

I agree to release and discharge the Representatives from any and all liability, demands, claims for injury or damage incurred, suffered or experienced by the Player, our invitees, guests and visitors, as applicable, during, in conjunction with or as a result of attendance at or participation in any CCC sponsored event.

I agree to indemnify and defend the Representative from any and all actions, liability, demands, claims incurred or performed during, in conjunction with or as a result of the attendance at or participation by the Player, as applicable, in any CCC sponsored event.

I have carefully read the foregoing and fully understand and agree to its contents on behalf of the Player, as applicable and myself. I am aware that the foregoing contains a release of liability and constitutes a binding obligation and sign it on my own free will. My signature hereon, as well as my participation in or attendance at activities and sponsored events of CCC, further acknowledges my acceptance of the statements above.

Signature of Parent or Guardian: _____ Date: _____