

**North County Senior Softball
Competitive Division
Registration**

Player's Name: _____

Address: _____

City: _____ Zip _____

Home Phone: _____ Shirt Size _____

Emergency Contact Phone _____ Hat Size _____

Email _____

Birth Date _____

Registration for New Members: \$100
Initiation fee covers: (1) White Shirt; (1) Blue Shirt; (1) NCSS Hat

Total Pd: \$_____ Cash/Check#_____ Payable to **NCSS-CD**

Date Pd:_____ Received by:_____

WAIVER OF LIABILITY

I, the above named player, do assume all risks and hazards incidental to participation in the North County Senior Softball League – Competitive Division. I do hereby waive, release, absolve, indemnify and agree to hold harmless the league, all organizers, sponsors, managers, coaches, league officers, and participants, and the Cities of San Marcos, Vista and Carlsbad, and their representatives and employees, for any claim arising out of an injury to me.

Signature _____ Date _____