

PIKE COUNTY YMCA ADULT SOFTBALL REGISTRATION FORM

TEAM NAME:		UNIFORM COLOR:	
<p>**No one may participate without a signature (Parent/guardian must sign for anyone under the age of 18)</p> <p>I, the undersigned, understand and acknowledge that participation in this activity can be hazardous, and I hereby assume all risk while participating. I, and anyone entitled to act on my behalf, waive and release the Pike County YMCA, USSA Softball, its agents, employees, officers, officials and sponsors from all rights and claims for any personal injury, death, or property damage suffered by me, my child, or that I cause to others, as a result of my participation in this program. I, the undersigned, agree, without any right of payment or editing, to allow the YMCA to use the images of me and/or my children, including reproductions of photos, video, audio or other reproductions, for use in all types of media for public relations purposes to promote YMCA programs.</p>			
Player Name	E-Mail Address	Phone	Signature**
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