

PLEASE PRINT FORM, COMPLETE AND RETURN WITH PAYMENT TO: FIRST FRIENDS SPORTS OFFICE, 5455 MARKET AVE N, CANTON, OH 44714 A COMPLETED FORM AND FEE WILL BE ACCEPTED IN THE SPORTS OFFICE UNTIL SPACES FILL UP OR April 27th by 4:00pm, WHICHEVER OCCURS FIRST.

MEN'S CHURCH SOFTBALL LEAGUE April 27- July 30th 2010

Please complete a separate form for each person.

EMERGENCY PROCEDURE INFO

Please Print Clearly.

Person to contact in emergency:

Last Name _____

First Name _____

Person's Phone _____ home cell work

Address _____

Person's Phone _____ home cell work

City _____ State _____ Zip _____

Second contact in emergency:

Phone _____ Birth Date _____

Daytime/Cell phone #: _____

Person's Phone _____ home cell work

E-mail _____

Person's Phone _____ home cell work

Mark Jersey Size: Adult M L XL XXL

Please list any allergic reactions, serious injuries or special medical procedures.

Past Playing Experience:

(# 1-4 in order of preference)

_____ Outfield

_____ Infield

_____ Catcher

_____ Pitcher

Hospital Preferred _____

Doctor _____

Dentist _____

Fee: (must be paid with registration)

_____ \$ 35 Registration Fee (\$5.00 fee for refunds

_____ minus \$10.00 if a paid participant in 2009 league

_____ Total due

I give my permission to the staff to secure a licensed physician in the case of an emergency to provide the necessary care.

Names of other family members playing:

Signature _____

Date _____

I give permission for my photo participating in First Friends Sports to be used on the First Friends Sports

Web Site: Yes No (please circle)

Signature: _____

Church Affiliation: _____ First Friends Church

If other Church:

Name _____ City _____

WAIVER AND INFORMED CONSENT STATEMENT

In consideration of my participation in the activities of the First Friends Church, I do hereby declare myself to be medically able to participate in the activities (basketball, softball, volleyball, etc.) offered by First Friends Church (I understand that there are risks which may include disabling injury and/or death involved in all physical activities and I agree to familiarize myself with all equipment, facilities, rules and physical demands related to the activities undertaken.) I agree to hold free from any and all liability the First Friends Church and its respective officers, employees, members, volunteers, and sponsors and do hereby for myself, my heirs, executors and administrators waive, and release and forever discharge any and all rights and claims for damages which I may have or which may accrue arising out of or connected with my participation in any of the activities of the First Friends Church. I have been appraised of and acknowledge the particular hazard and potential danger involved in my participation in the 2010 Softball league.

Signature: _____

PLEASE RETURN COMPLETED FORM WITH FEE TO FIRST FRIENDS SPORTS OFFICE AT ADDRESS LISTED ABOVE.