



MEMBERSHIP WAIVER AND REGISTRATION

Disclosure Notice: The information obtained from this form will be stored in a Private Electronic Database for use by authorized users of the database for softball related purposes ONLY. Your information will NOT be used or provided for personal use, sold or otherwise reproduced for NON-Softball use. **No CONFIDENTIAL PERSONAL OR FINANCIAL INFORMATION will be asked for, or should ever be provided by you.** Your information will be used to produce team rosters, contact lists, announcer's information, etc. **DO NOT PROVIDE ANY REQUESTED INFORMATION IF YOU FEEL IT WILL VIOLATE YOUR RIGHTS TO CONFIDENTIALITY OR INVADES YOUR PRIVACY!** _____ Initial

- **This form must be completed and dues paid before you engage in ANY Softball Club Activity.**
- **CLUB DUES ARE FROM January 1 to December 31 and are neither REFUNDABLE nor PRORATED.**
- **A \$100.00 fee is assessed to all new members. Yearly renewal fee is \$25.00**
- **Please pay by check. Make checks payable to: Sun City West Softball Club**
- **All articles of Uniforms are the property of the SCWSC (Sun City West Softball Club) and must be returned by any player who resigns membership.**

(PUBLISHED INFORMATION) Name _____

Please Print (LAST NAME, FIRST NAME)

Primary Phone# _____ EMAIL Address _____

(NON-PUBLISHED INFORMATION)

Address _____

Emergency Contact Person _____ Emergency Contact Persons Relationship _____

Birth date _____ Rec Card Number _____ Rec Card Exp. Date _____

(Month, Day, Year)

(Month/Day)

Secondary Phone# _____ 2nd EMAIL Address _____

*I understand that as a member of the **Sun City West Softball Club**, I agree to legally waive, and release, and discharge any claims for damages for personal injury, death or property which I may have, or which may occur to me, as a result of participation in any activity associated with the **Sun City West Softball Club**. This release is intended to discharge in advance the Governing Board (individually or as a group), and/or individual Club members, from any and all liability arising out of or connected in any way with my participation with the **Sun City West Softball Club**, even though that liability may arise out of negligence or carelessness on the part of the entities named above. It is understood that the activities associated with the Club involves an element of risk and danger of accidents, and knowing those risks, I hereby assume those risks. It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and hold the above persons or entities harmless from any loss, liability, damage, cost or expense which may incur as a result of my death or any injury or property damage that I may sustain while participating in any and/or all Sun City West Softball Club activities.*

Signature _____ **Date** _____

Club use: Received by: _____ Date: _____ Treasurer Rec'd: _____

Date Scanned: _____ Date Posted: _____