



SUN CITY WEST MEMBERSHIP WAIVER

Waiver must be completed before you engage in open practice or in any SCW Softball league play at Liberty Field.

- Membership dues are from **January 1st through December 31st** and are neither refundable nor pro-rated.
- A **\$150.00** initial fee is assessed to all new members for uniform & first year's dues. Dues are **\$50.00/year thereafter**.
- **Make checks payable to Sun City West Softball Club. Membership dues are paid at the Green Team tryout.**
- Club jerseys are the property of the Sun City West Softball Club and must be returned by the player after league play.

Name _____

AZ Home Address _____

Primary Phone Number _____

Rec. Card Number _____ Email Address: _____

Playing Position (S) _____

Emergency Contact _____ Phone Number _____

*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 of Applicant: _____

Date: _____

Received by _____ Date _____ Received Treasurer _____

Date Posted to Database _____

Sun City West Softball Club
14401 RH Johnson Blvd
Sun City West, AZ 85375