

**2017 WOMEN'S FOREST HILL SOFTBALL REGISTRATION FORM**

Player's Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Home Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Cell Phone \_\_\_\_\_

**EMERGENCY INFORMATION:**

Name \_\_\_\_\_ Phone \_\_\_\_\_

**1. Circle your experience Level:**

None, never  
played before

Played when I  
was younger

Played recently,  
I'm an OK player

I am an  
experienced player

**2. Select one:**

I volunteer to manage a team.

I would like to play on \_\_\_\_\_'s team.

I would like to be a teammate with \_\_\_\_\_.

I just want to play. Please assign me to a team that needs players if there is room available.

**3. PLAYER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

**PROGRAM PARTICIPATION AGREEMENT:** I confirm that I have read and understand the Forest Hill participation/waiver agreement and the concussion information on the FH web site. In accordance to Maryland law, I also understand that information on Youth Sports Concussion and Head Injuries is available at <http://www.cdc.gov/headsup/youthsports/index.html> and information on Sudden Cardiac Awareness can be found at <http://www.nhlbi.nih.gov/health/health-topics/topics/scda>. I do hereby expressly agree to release Harford County, Maryland, a body corporate and politic of the State of Maryland, and its elected and appointed officials, agents, officers, and employees, FHRC Adult Softball program, officers, team, manager, coaches, umpires or instructors from all liability arising from any harm or injury, including death, sustained by me while participating in this program, traveling to or from activities. I also confirm that I have read and understand the Forest Hill Code of Conduct and Legal Waiver documents and agree to abide by the stated terms.

**Fee - \$25 per player. Jerseys (if needed) will be a separate charge through the team manager.**

**Mail the fee and form to: WOMEN'S SB REGISTRATIONS, 804 Lancaster Drive, Bel Air, MD. 21014.**

**Registration Deadline – May 31, 2017. Season runs JULY 7 THROUGH SEPTEMBER 2017.**

TOTAL FEE PAID \$ \_\_\_\_\_ CHECK # \_\_\_\_\_ CASH \$ \_\_\_\_\_ DATE \_\_\_\_\_

FOR INFORMATION, CONTACT Cyndi Clark, [fhrcwomenssoftball@gmail.com](mailto:fhrcwomenssoftball@gmail.com)