

REGISTRATION FORM • 2017 SEASON

PLEASE PRINT CLEARLY All correspondence is sent through EMAIL



Name _____

Date of Birth _____ Sex: Male Female

Address _____ City _____ Postal Code _____

Home Tel # _____ Work Tel # _____ Cell # _____

Email (Prim.) _____ Alt. _____

Are you new to the League	Yes	No
If no, what team did you play on last year _____		
Have you ever played organized slo -pitch	Yes	No
In order of choice, state 3 positions you are comfortable playing	1.	2.
	3.	
If you are a pitcher which do you prefer	<input type="checkbox"/> Starting Pitcher	<input type="checkbox"/> Back Up Pitcher
What is your style of play	<input type="checkbox"/> Competitive	<input type="checkbox"/> Recreational
		<input type="checkbox"/> Very Recreational
How would you rate your skill level (check one) Please be honest.	<input type="checkbox"/> Beginner	<input type="checkbox"/> Below average
	<input type="checkbox"/> Average	<input type="checkbox"/> Above Average
		<input type="checkbox"/> Excellent
Will you be a Team Captain	Yes	No
	Maybe	
Shirt Size	<input type="checkbox"/> Small	<input type="checkbox"/> Medium
	<input type="checkbox"/> Large	<input type="checkbox"/> X Large
	<input type="checkbox"/> XX Large	<input type="checkbox"/> XXX Large
I am willing to help with the following events	<input type="checkbox"/> Picnic	<input type="checkbox"/> Banquet
	<input type="checkbox"/> Tournament at Kinsmen Park	<input type="checkbox"/> Golf Tournament
Impairments or medical conditions my Team Captain should be aware of are as follows:	<input type="checkbox"/> Check here if no impairments or medical conditions	

Waiver of Claims, Release of Liability, Assumption of Risks and Indemnity Agreement – read carefully.

I _____ (print full name) hereby release West Shore Mixed Slo Pitch League (WSMSP League) and its volunteer committee/members, other players, captains, umpires, officials, convenors, and City of Pickering (referred to as the "Releases") from any or all liability and any or all claims I may have now or in the future for damages arising from any accident or injury in connection with any personal injury, loss or damage that I or my guests may sustain, including injury resulting from negligence or the carelessness of other players, which are caused by or occur during the use of the facilities or playing fields or arise by participation in any game, event, practise or in any facility or at any location in connection with the WSMSP League including negligence, breach of contract or breach of statutory or other duty of care including any duty of care owed under the Occupier's Liability Act., on the part of the Releases, and including the failure on the part of the Releases to safeguard or protect me from the risks, dangers and hazards of slo -pitch referred to herein.

Protective equipment worn during play is for my safety and my responsibility. I am aware the League recommends players to wear CSA approved mouth guards and batter's helmets and it is my responsibility to obtain and wear protective equipment for my use. I am aware that slo -pitch involves many inherent risks, dangers and hazards, including but not limited to, trip hazards, changing weather conditions, changes or variations in the fields and surrounding areas, surface or sub -surface, causing slippery walking and running conditions, baseball bats slipping out of a player's hands, variable speeds in baseballs being released from a player's hand; impact or collision with other players, fences, baseballs, equipment or structures, the failure to play safety or within one's own ability or within designated areas, negligence of other players, negligence on the part of WSMSP League or its volunteers including the failure on the part of WSMSP League and its volunteers to safeguard or protect me from the risks, dangers and hazards of slo-pitch. I am also aware that the risks, dangers and hazards associated with slo-pitch and I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage and loss resulting there from..

I hereby give my consent to the photographing of myself. WSMSP is hereby authorized to use or cause to be used said still photographs or video footage and my name for advertising, publicity, commercial or other business purposes. Said photographs and/or recordings may be used singularly or in conjunction with other photographs and/or recordings. WSMSP has my authorization to reproduce, or cause to be reproduced and used such photographs and videos. The same may be exhibited in all domestic and foreign markets. I understand that others may use and/or reproduce said photographs and/or recordings with or without WSMSP's consent. I hereby release WSMSP, any of its associated individuals, their directors, officers, agents, employees, customers and the league's appointed advertising agencies, officers, directors, agents and employees, from all claims of any kind on account of such use.

Health Card # (optional) _____ Signature _____ Date _____

**NO ALCOHOL OR DRUGS ARE PERMITTED IN CITY PARKS.
UNSPORTSMANLIKE CONDUCT OR CONDUCT WHICH REFLECTS POORLY UPON THE LEAGUE WILL NOT BE TOLERATED**

Registration form and \$125 payment must be received by March 1, 2017 for returning players to retain League status. Please Note After the Deadline registration fees will be \$150. NO NEW ENTREES AFTER APRIL 1st 2017. Make cheques payable to West Shore Mixed Slo-Pitch Association. There will be a \$25.00 charge for NSF cheques. No refunds after June 1, 2017.

Comments and requests: _____

(Note: Requests MUST be reciprocal). MAX Groups of 4 (No guarantees – we try to accommodate)