

HENDERSON SPORTS GROUP

SENIOR SOFTBALL LEAGUES

2012 Registration

Name _____ Shirt Size _____

Address _____ City _____ Zip Code _____

Home Phone _____ Cell Phone _____

E-mail Address _____ Date of Birth _____ Age _____
(Email addresses used for individual correspondence & periodic announcements. We do not share information with any organizations.)

Positions Played _____

PLEASE CHECK ALL LEAGUES YOU ARE ENROLLING FOR:

<u>League</u>	<u>Days</u>	<u>Dues</u>		<u>Team Assigned</u>
40+ Men	Wednesday nights	\$ 60	<input type="checkbox"/>
40+ Men	Saturday mornings	\$ 55	<input type="checkbox"/>
50+ Men	Mon. & Tue. nights	\$ 60	<input type="checkbox"/>
55+ Men	Thursday nights	\$ 60	<input type="checkbox"/>
60+ Men	Sunday mornings	\$ 55	<input type="checkbox"/>
40+ Women	Monday nights	\$ 60	<input type="checkbox"/>
Coed <small>(25+ W, 35+ M)</small>	Tue. & Wed. nights	\$ 60	<input type="checkbox"/>

Winter
 Spring
 Summer
 Fall

Total dues paid:

\$ _____

Cash: Check:

Check #: _____

Make all checks payable to:
 "Henderson Sports Group".

PLEASE NOTE BY SIGNING THIS ENROLLMENT FORM, YOU AGREE TO ADHERE TO ALL HENDERSON SPORTS GROUP RULES AND REGULATIONS.

1. No fighting or cursing on or off the field
2. No alcohol allowed at the fields
3. No arguments with any of the umpires' calls
4. Players must wear their shirts whenever on the playing fields. No excuses.

FAILURE TO ABIDE BY THE ABOVE RULES WILL CAUSE SUSPENSION OR TERMINATION FROM THE LEAGUE.

Terms of Enrollment

In consideration of the permission granted to the above-named to participate in all league activities, I do hereby agree, on my own behalf, to release Henderson Sports Group, and its affiliates, administrators, employees, agents and representatives from any and all actions, causes of actions, damages, claims, or demands of whatever kind of nature which the above-named may have against Henderson Sports Group, or the above listed parties for injuries known or unknown, which are incurred by, arise from, or in any way relate to the above-named participation in all league activities. Henderson Sports Group is not responsible for lost or stolen items.

There are no refunds whatsoever for any and all league changes. I, as the participant, hereby give permission for my participation in all league activities. I further authorize, without my prior approval, the rendering of any emergency medical treatment that may become necessary due to my participation in the activities. I have read this release and fully understand its terms. I execute the release voluntarily and with full knowledge of its significance and consequences

These contract terms constitute the full understanding hereto and no changes, modifications, or waiver of any terms shall be effective unless in writing and signed by both parties.

Signature: _____ Date: _____

Please mail, fax, or email to:
 Henderson Sports Group, c/o Arthur Werner
 1608 Carlisle Corner Court
 Henderson, NV 89052

Phone: 702.683.7700
 Fax: 702.837.9527
 www.hendersonsoftball.com
 E-mail: mgfslp@cox.net

