The Department of Parks and Recreation is providing this program in order to help individuals with no team affiliation an opportunity to play in a recreational sports program. Placement on a team will be based on the information provided below.

NAME:_________________________________________ SEX: MALE______ FEMALE_____
ADDRESS:_________________________________________ HOME PHONE:____________________
_________________________________________________ WORK PHONE:____________________
E-MAIL ADDRESS:_________________________________ FAX:___________________________

SPORT INTERESTED IN:
SOFTBALL:_____ BASKETBALL:_____ INDOOR VOLLEYBALL:_____ SAND VOLLEYBALL:_____
FLAG FOOTBALL _____ ADULT SOCCER_____

REGISTRATION FEES: You will be notified when you are placed on a team what the player fee will be. Fees will be based on the number of people on a team divided into the cost of a team registration.

COMPETITION LEVEL: (How do you rate yourself as a player?)
COMPETITIVE PLAYER:_____ AVERAGE PLAYER:_____ RECREATIONAL PLAYER:_____

Briefly describe your playing experience:
_____________________________________________________  

_____________________________________________________

LEAGUE TYPE:
MEN’S:______ WOMEN’S:______ CO-REC:______

NIGHTS YOU ARE AVAILABLE TO PLAY: (Please DO NOT list any night that you are unsure of).
SUN:_____ MON:_____ TUES:_____ WEDS:_____ THURS:_____ FRI:_____

POSITIONS PLAYED: (List below the positions that you are willing to play in the sport you chose).
__________________________________________________________

ARE YOU WILLING TO BE A TEAM MANAGER OR CAPTAIN? YES:_____ NO:______

Please submit this registration form to:
Department of Parks & Recreation
Sports Division
100 E. Walnut Street
Evansville, IN. 47713
Or fax to: 812-435-6142
Registration fees will not be refunded if you are placed in a league.

PLAYER WAIVER, RELEASE OF LIABILITY, AND INDEMNIFICATION FORM

I, the undersigned player, acknowledge, agree and understand that:

1.) Voluntarily and of my own free will, I elect to participate as a member of the team and league for which I am placed by the City of Evansville DPR Sports Staff.

2.) I understand that there are certain risks and hazards involved in participating in these leagues that may result in injury or death to me or other players, including, but not limited to those hazards associated with weather conditions, playing conditions, field design, gymnasium conditions, field maintenance, field condition, equipment, or other participants.

3.) I understand the risks of sports is dangerous to me and to other players and may result in serious injury or death.

4.) I understand that the very nature of the game is hazardous and risky, including, but not limited to, the acts of falling, tripping, slipping, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players.

Further, I the undersigned player, agree that in consideration of the right to play as a member of this team, and in consideration for permission to play on the fields, or in the buildings arranged for by the City of Evansville or the Department of Parks and Recreation, I agree as follows:

1.) I acknowledge that I have a duty to inspect the conditions of the field, or gym, and areas surrounding prior to each game and throughout the game. If I begin any inning or part thereof, I waive any claim for any injury arising from a defective condition of the field or surrounding area.

2.) I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, (c) while on or upon the premises of any and all of the fields or gyms, arranged for by my team or league, the City of Evansville, or the Department of Parks and Recreation for practice or play, and (d) for all risks of injury associated with any latent or patent defects of the field or the improvements surrounding the field.

3.) I release, discharge, and agree not to sue the team and league designated below, the City of Evansville, the Department of Parks and Recreation, the field owner or other entity designated below, the Amateur Softball Association of America, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league field, or Amateur Softball Association of America for any claim, damages, costs or cause including but not limited to the negligence, omission, breach of contract or wrongful conduct of the City of Evansville, Department of Parks and Recreation and these parties are hereby released from liability.

I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

Printed Name

Signature

DPR USE ONLY:

RECEIPT #___________ PAID:________