

**REGISTRATION FORM 2017**

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NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POSTAL CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB M/D/Y: \_\_\_ \_\_\_ / \_\_\_ \_\_\_ / \_\_\_ \_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REGISTRATION FEE - $ 140.00**

PAID BY: \_\_\_CASH \_\_\_CHEQUE CHEQUE’S PAYABLE TO *DWSA*

**TEAM REGISTERING FOR:**

**IS THIS A TRANSFER?** \_\_\_\_ YES \_\_\_\_NO (**if yes, please select 1st, 2nd, & 3rd choice**)

ANGELS \_\_\_\_\_ HILLCATS \_\_\_\_\_ STEALERS \_\_\_\_\_ GATORS \_\_\_\_\_

DIAMONDS \_\_\_\_\_ PEACHES \_\_\_\_\_ WARRIORS \_\_\_\_\_ ROOKIES \_\_\_\_\_

GIT R DONE \_\_\_\_\_ OUT OF THE BLUE \_\_\_\_\_

**V-NECK DRY FIT *MENS SIZES***: SHIRT# \_\_\_\_\_\_ SIZE \_\_\_\_\_\_

I consent to the use by the DWSA of any photographs taken of me for possible publication in the DWSA’s website for promotional publication. \_\_\_\_ YES \_\_\_\_NO

**WAIVER FORM (please read before signing below)**

I am at least 18 years of age as of January 1st this current playing year. I understand that the registration fee entitles me to play softball during the upcoming season. If I leave the league for any reason during the season, **I** **WILL RETURN** all equipment (shirt, etc.) belonging to the league or **I WILL FORFEIT** future rights to rejoin the league. I understand that if for any reason I am unable to play in the league and advice the league **PRIOR TO THE FIRST GAME OF THE SCHEDULE**, a full refund of my registration fee will be issued.

The Dundas Women’s Softball Association will not be held liable for any injury incurred while traveling to and from games and/or practices or any other league function.

**NOTE: FAILURE TO SIGN THIS FORM WILL RESULT IN YOUR REGISTRATION BEING INVALID**

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLAYERS SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLAYOFFS START SEPTEMBER 14-18 & SEPTEMBER 21-22**