



## REGISTRATION FORM 2018

www.dwsa.ca

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

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

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

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

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

### REGISTRATION FEE - \$ 140.00

PAID BY:  CASH  CHEQUE  E-Transfer CHEQUE'S PAYABLE TO DWSA

### TEAM REGISTERING FOR:

IS THIS A TRANSFER?  YES  NO (if yes, please select 1<sup>st</sup>, 2<sup>nd</sup>, & 3<sup>rd</sup> choice)

ANGELS  GREENSVILLE  STEALERS  GATORS

DIAMONDS  PEACHES  WARRIORS  ROOKIES

GIT R DONE  OUT OF THE BLUE

SHIRT# \_\_\_\_\_ SIZE \_\_\_\_\_

**PITCHERS and CATCHERS are needed please indicate which one or both that you play or are willing to play.** Pitcher  Catcher

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 1<sup>st</sup> 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 13**