

**REGISTRATION FORM 2020**

www.dwsa.ca

NAME:

ADDRESS:

CITY:       POSTAL CODE:

PHONE:       DOB M/D/Y:       EMAIL:

**REGISTRATION FEE - $ 140.00**

PAID BY: CASH CHEQUE  E-Transfer (Indicate in message section of etransfer, name and team) **CHEQUE’S PAYABLE TO *DWSA***

**TEAM REGISTERING FOR:**

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

ANGELS  STEALERS  GATORS  DIAMONDS  PEACHES  WARRIORS  GIT R DONE  OUT OF THE BLUE

SHIRT#       SIZE

**\*\*\*IF YOU ARE NEW TO THE LEAGUE: YEARS OF EXPERIENCE**

**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

**ADDITIONAL COMMENTS:**

**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 8**