HUNTSVILLE SENIOR RECREATIONAL SOFTBALL REGISTRATION & EMERGENCY INFORMATION FORM

Name:	Birth date:		
Address:			
		E-mail:	
Preferred Playing Position:		Projected Percentage Game Attendance	
	In Case of Emerge	ncy Please Notify:	
Name:	Relationship:	Phone:	
Health Information Specify health conditions that ne	ed to be known in case	of emergency:	
Doctor:		Phone:	
	Liability	Waiver	
Center, the City of Huntsville Recreations organizations, their agents, employed actions, or claims of whatsoever kin	ational Services Departme ees, representatives, volur d or nature which I or my	ge, indemnify, and hold harmless STUDIO 60 Senior nt, the Softball League, and all other sponsors or any other nteers, officers, directors, and assigns from any and all representatives or assigns may have or at any time in the g out of my participation in the STUDIO 60 Senior Center	
	hysically able to compete	minimum age this year, (63 male/ 55 female), am in good in the softball program and I agree with the spirit and	
Signature		Date:	
Shir	rt size: Sm Med Lg XL :	XXL (shirts may run small)	

This form must be completed before an applicant can participate in the Senior Softball Program

Appropriate fee (\$75.00) can be paid with submission of completed form. Make check payable to STUDIO 60 Senior Center

Please mail registration form and check to:

STUDIO 60 Senior Center Attn: Activities Director 2200 Drake Avenue Huntsville, AL 35805

Current team members: Would you prefer to stay on the same team or be traded?

STAY TRADE