

Girl's Softball Clinic

with Michelle Moultrie, TEAM USA



Sponsored By:

Queen Anne's County Recreation &
USA Softball of Maryland—DC—Delaware



Participants dress comfortably and must bring lunch, helmet, bat and glove.

Sign in for registered participants begins at 8a.m.

Cost: \$100 (Maximum 30 Athletes)

Participant's Name (First): _____ (Last) _____ Age: _____ DOB: _____

Medical Information (allergies, disabilities, medication, etc) _____

Location: Kent Island Elementary School

Dates: Saturday, January 14, 2017

Times: 9:00 a.m. - 5:00 p.m.

Program#: 105002

Payee Name (Parent/Guardian/Adult): _____

Address: _____ Home Phone: _____

City: _____ State/ZIP: _____ Cell Phone: _____

Email: _____

Method of Payment (circle one): Cash Check/Money Order (Payable to QAC Recreation) MasterCard/VISA

Card # _____ Exp: ____/____

Signature: _____

I recognize the risks of illness and injury in any exercise/physical fitness or education and am participating in the Recreation program upon the express agreement and understanding that I am hereby waiving and releasing Recreation, its officers, directors, employees and agents from any and all claims, costs, liabilities, expense or judgment, including attorney's fees and court costs (herein, collectively "Claims") arising out of my participating in the aforesaid course/activity or any illness, injury or death resulting there from and hereby agree to indemnify and hold harmless the Recreation Division from and against all such Claims except Claims proximately caused by the gross negligence or willful misconduct of Recreation Division. *** Participants may at some time be photographed for publicity purposes.**

Parent/Guardian Signature (1)

Parent/Guardian Signature (2)

If a parent or guardian does not have sole legal custody of the child, both signatures are required. By submitting a single signature, the parent/guardian is indicating that he/she has sole legal custody of the participant.