

2024 Softball Sign Up Sheet

10U Slow Pitch - 10U Fast Pitch 12U - 14U - 16U - 18U





Child's Name	
Child's Age	
<u>Team</u>	
Parent/Guardian <u>Name</u>	
Address	
Phone Numbers (if your child has a phone, please include that number)	

If you need financial assistance with program fees or equipment purchases, please check this box and a coach will be in touch.

IMPORTANT INFORMATION - PLEASE READ

- Please fill out this form if your child wishes to play softball for a Clark team through the Watertown JO Softball Organization.
- 2. After you complete the sign-up sheet, please complete the waiver on the back side.
 - 3. Please return this form to the Finance Office (located at City Hall in Clark).
- 4. Please utilize the drop box (located in the east entrance) if you're visiting City Hall after normal business hours.

The City of Clark does not collect program fees for Watertown JO softball, but we do need to know how many players each team will have before we can hire the coaches.



2024 Softball Sign Up Sheet

10*U* Slow Pitch - 10*U* Fast Pitch 12*U* - 14*U* - 16*U* - 18*U*

PLEASE FILL OUT A SEPARATE FORM FOR EACH CHILD PARTICIPATING IN SOFTBALL



Child's Name	
Child's Age	
<u>Team</u>	
Parent/Guardian <u>Name</u>	
<u>Address</u>	
Phone Numbers (if your child has a phone, please include that number)	
If you need for	inancial assistance

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WAIVER OF LIABILITY AND RELEASE FOR SUMMER RECREATION PROGRAM

1. CHIEF HAVING CHROHEU III LIE CHV OF CIAIX SUITINE RECTEAUDH DIOGFAINS
I,
I hereby affirm that I (or my child) am in good physical condition and do not suffer from any disability that would prevent or limit my participation in the enrolled program.
For and in consideration of permitting me (or my child) to enroll and participate in the City of Clark Summer Recreation program, I voluntarily release, discharge, waive, and relinquish any and all actions or causes of action for personal injury, death or property damage occurring to me (or my child) as a result of engaging or receiving instruction in summer recreation, or the use of any ball devices, or in any activities incidental to the foregoing activities or instruction, wherever or however such injury, death, or property damage may occur, and for whatever period during which such activities or instruction may occur.
I, on behalf of myself (or my child), and on behalf of any of my heirs, executors, administrators, and assigns release, waive, discharge and relinquish any actions or causes of action for personal injury, death, or property damage that may arise from participating in summer recreation instruction or activities conducted by the City of Clark, and I agree that under no circumstances will I, or my heirs, executors, administrators, and assigns prosecute or present any claim for personal injury, death, or property damage arising from participating in any baseball or softball activities or instruction conducted by the City of Clark, or its agents and employees.
I, on behalf of myself (or my child), and on behalf of my heirs, executors, administrations, and assigns, agree that in the event any claim for personal injury, death, or property damage shall be prosecuted against the City of Clark, its agents or employees, I shall indemnify and save harmless the City of Clark, its agents and employees from any and all such claims or causes by whomever made and wherever presented.
I acknowledge that I have read this Waiver of Liability and Release, that I have been fully and completely advised of potential dangers incidental to engaging in the activities and instruction of the summer recreation program, and that I am fully aware of the legal consequences of signing this release.
Date: Signature of Parent / Guardian:
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WAIVER OF LIABILITY AND RELEASE FOR SUMMER RECREATION PROGRAM
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