

2021 - 7 v 7 Summer Field Hockey League Dates: 6/14, 6/16, 6/21, 6/23, 6/28, 6/30, 7/5, 7/7

Games Played at Eastern University - Wayne Pa

TEAM & INDIVIDUAL REGISTRATION FORM

Registering: □Team □Adult Individual	Position	on: □Forv	vard □M	lid 🗆 Back 🗀 Goali	ie
Check Division: ☐ Middle School ☐ High S	chool - L	evel OV	\bigcirc JV	☐ Adult / Collegiate	ì
Team Name (if already on a team):				# of Players	_
Contact's Name (if registering as a team):					
Contact's Email:			Conta	cts Cell #	
Players Name:					
Street Address:					
City:					
Players Cell Phone:			•		
School Name:					
Players Email:					_
****Email will be used as the primary form of com	nmunicatio	n - <u>Please pi</u>	<mark>rint email ac</mark>	dress CLEARLY	
PAYME	NT INFO	ORMATION		<u> </u>	
Registration Ends: June 7 th Payment: Check # Cash On-l	** Ead	ch team must	submit a Te	vo registration fees am Roster Form	
Please Return This Form To:	* Make c	heck payabl	e to "Viper	Sports Club"	
Viper Sports Club* 832 N Lewis Road Limerick, PA 19468 Questions? Phone 610-495-0999			or Individu	<u>a convenience fee</u> : als / \$1112 for Teams R CARD	
	Name on Cr	edit Card			
** <u>ALL</u> payments to the Viper Sports Club are non-refundable unless a program is cancelled by the Viper Sports Club due to insufficient participation				StateZip	
**ALL credit card payments are done through the Viper Sports Club Square account and Includes as 3.1% Convenience Fee				Total Amount \$	
ASSUMPTION AND RELEASE OF LIABILITY: Contact sports are inherently da "Participant") hereby: (1) assume the risk of personal injury, illness due to bacter related to activities by the Viper Sports Club; (2) release Winning Edge Sports LI directors and members(collectively "VIPER SPORTS") from all liability, claims, or Sports Club Summer League; and (4) release VIPER SPORTS from Injury arisin employees, staff members, directors and officers to take whatever action is nece employees, staff members, directors and officers from any responsibility or liability that you retain the right to use these visual images in future literature for Viper Sports, or any testimonials made by us without limitation in advertising and promobelow, and agree that the grant and release contained there in binds me and the	ialvirus/Covid-19 C, BH Champio r responsibility fo g from any good ssary, in their be ty related thereto ports Club withou ting the Viper Sp	O, property damage, in Sports LLC, Viper or Injuries to Participa faith acts or omission est judgment, in an epo. I agree that you must compensation to roorts Club. I represe	or other loss (collec Sports Club, and it- ant; (3) grant permis ons in emergency si mergency and I her ay photograph and/ ny child or me. I fur	ctively "Injuries") to the Participant arising from a sagents, employees, staff members, officers, ssion for Participant to participate in activitie ituations. I authorize VIPER SPORTS, its agreeby release discharge VIPER SPORTS, its for videotape my child or I during sports activated agree that you may use my name, my controlled.	s, es at Viper gents, agents, vities and child's
Signature (Parent if under 18yrs)				Date	

FOR OFFICE USE ONLY: Date Deposited ______ Amount Paid _____ Check No. _____ Square Payment Date: _