

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	Positi	<mark>on:</mark> □Forv	vard \square	Mid □ Ba	ick 🗆 Goalie
Check Division: ☐ Middle School ☐ High S	School - L	.evel \bigcirc V	\bigcirc JV	☐ Adu	ılt / Collegiate
Team Name (if already on a team):				_ # of Pla	yers
Contact's Name (if registering as a team):					
	Contacts Cell #				
Players Name:					
Street Address:					
City:	State:		Zip: _		
Players Cell Phone:					
School Name:					
Players Email:					
****Email will be used as the primary form of cor	nmunicatio	on - <u>Please p</u> i	<mark>rint email a</mark>	ddress CLEA	RLY
РАУМ	ENT INFO	ORMATION			
Registration Ends: June 9 th Payment: Check # Cash On-	** Ea	o rosters with ch team must	submit a Te	eam Roster F	- orm
Please Return This Form To:					
Viper Sports Club* 832 N Lewis Road Limerick, PA 19468 Questions? Phone 610-495-0999	* Make check payable to "Viper Sports Club" * Credit Card Payment includes a convenience fee: \$117 for Individuals / \$1112 for Teams Card Type: VISA MASTER CARD Name on Credit Card				
** <u>ALL</u> payments to the Viper Sports Club are <u>non-refundable</u> unless a program is cancelled by the Viper Sports Club due to insufficient participation	Address: City:			State	Zip
**ALL credit card payments are done through the Viper Sports Club Square account and Includes as 3.1% Convenience Fee					ount \$
ASSUMPTION AND RELEASE OF LIABILITY: Contact sports are inherently d "Participant") hereby: (1) assume the risk of personal injury, illness due to bacte related to activities by the Viper Sports Club; (2) release Winning Edge Sports L directors and members(collectively "VIPER SPORTS") from all liability, claims, c Sports Club Summer League; and (4) release VIPER SPORTS from Injury arisi employees, staff members, directors and officers to take whatever action is nec employees, staff members, directors and officers from any responsibility or liabil that you retain the right to use these visual images in future literature for Viper S name, or any testimonials made by us without limitation in advertising and prom below, and agree that the grant and release contained there in binds me and the	ria/virus/Covid-19 LC, BH Champic or responsibility for ng from any good essary, in their bility related therete sports Club witho ooting the Viper S e minor of all of it	O, property damage, on Sports LLC, Viper or Injuries to Particip. I faith acts or omissic est judgment, in an eo. I agree that you mut compensation to roports Club. I represe sterms	or other loss (colle Sports Club, and ant; (3) grant permons in emergency mergency and I hay photograph and ny child or me. I fu	ectively "Injuries") to its agents, employen ission for Participar situations. I authorize ereby release disch d/or videotape my curther agree that you he age of 18 or a pa	the Participant arising from or es, staff members, officers, nt to participate in activities at Viper ve VIPER SPORTS, its agents, arge VIPER SPORTS, its agents, hild or I during sports activities and u may use my name, my child's arent/guardian of the minor named
Signature (Parent if under 18yrs)				Da	te

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