UNION COUNTY SENIOR SOFTBALL LEAGUE 2016 REGISTRATION FORM

"Lets Play Ball and Have Some Fun"

PLEASE PRINT CLEARLY:

Last 1	Name:	First Name:
Stree	t Address:	
City	or Town:	Zip Code:
Home	e Phone:	Uniform shirt size: number:
Emai	l address:	
Wou	ld you like to receive league communications at th	his email address in 2016? YES NO (Circle One)
Date	of Birth:	Age on Dec. 31, 20 <u>16</u> :
1.	Have you participated in the UCSSL previous	sly? YES NO (Circle One)
2.	If you answered YES above, for how many co	onsecutive years?
3.	If you answered YES above, what team(s) did	l you play on?
	(50's)	(60's)
4.	Are you currently assigned to a team(s)?	
	(50's)	(60's)
** <u>N</u>	NOTE: all <u>NEW</u> players must submit a photocost for membership in the UCSSL (on one to Total cost to play in both the 50's and 60's	team)\$75.00
		ollowing, and sign where indicated. ne will not accept registration forms not signed!
	STATEMENT OF DIS	SCHARGE OF LIABILITY
office any A I agre incur This s reque I here	ers and League officials from any claims, suits or other a act or omission by the League. See to participate in League play in the Union County Se will be paid for through my own personal medical plan statement remains in effect as long as I participate in the est to void this Statement of Discharge of Liability.	to exclude the Union County Senior Softball League and all of its actions arising from, caused by, or which are the alleged result of enior Softball League <u>at my own risk</u> and any injuries which I may nor from my own personal funds. The Union County Senior Softball League or until I submit a written realize that I am liable to be banned from UCSSL for life if the
LEG	GAL SIGNATURE:	DATE:

Return completed form, with payment (and copies of license if you are new to the league), to team manager (preferred), or mail to: UCSSL 938 Summit Ave. Westfield, NJ 07090