

**HUNTSVILLE SENIOR (55+) ROCKETS
2025 SENIOR SOFTBALL REGISTRATION & EMERGENCY
INFORMATION FORM**

Name _____ Birth date _____

Address _____

City _____ Zip Code _____ Home Phone _____

Day Phone(s) _____ E-mail _____

Preferred Playing Position _____ Projected Percentage Game Attendance _____

In Case of Emergency Please Notify:

Name _____ Relationship _____

Address _____ Phone _____

(Please use the back of form if additional space is needed)

Health Information:

Do you have specific health conditions or problems that need to be known in case you need emergency treatment?

No () Yes () If yes, briefly explain: _____

Family Doctor _____ Phone _____

Liability Waiver:

I, the undersigned participant, hereby release, acquit, discharge, indemnify, and hold harmless the STUDIO 60 Senior Center, the City of Huntsville Recreation Services Department, the Softball League, and all other sponsors or any other organizations, their agents, employees, representatives, volunteers, officers, directors, and assigns from any and all actions, or claims of whatsoever kind of nature which I or my representatives or assigns may have or at any time in the future have as a result of any injury, physical or mental, arising out of my participation in the STUDIO 60 Senior Center Softball Program.

I warrant and represent that I am/ will be at least 55 years of age as of December 31, 2025, I am in good physical health and condition, and I am physically able to compete in the softball program.

Signature _____

Date _____

This form must be completed before an applicant can participate in the Senior Rockets Softball Program. Please mail registration form along with a check for \$65.00 payable to STUDIO 60 Senior Center. Mailing address:

**STUDIO 60 Senior Center
Attn: Debbie Martinez
2200 Drake Ave
Huntsville, AL 35805**