

**HUNTSVILLE LEGENDS SENIOR RECREATIONAL SOFTBALL
REGISTRATION & EMERGENCY INFORMATION FORM**

NAME: _____ DOB _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

PREFERRED PLAYING POSITION: _____ Projected % Attendance _____

EMERGENCY CONTACT: _____ PHONE #: _____

RELATIONSHIP: _____

SPECIFY HEALTH CONDITIONS THAT NEED TO BE KNOWN IN CASE OF EMERGENCY:

DOCTOR: _____ PHONE #: _____

PREFERRED HOSPITAL: _____

LIABILITY WAIVER

I, the undersigned participant, hereby release, acquit, discharge, indemnify, and hold harmless STUDIO 60 Senior Center, the City of Huntsville Recreational Services Department, the Softball League, and all other sponsors or any other organization, their agents, employees, representatives, volunteers, officers, directors, and assigns from any actions, or claims of whatsoever kind or 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 the required minimum age this year (63 male, 55 female), am in good physical health and condition, am physically able to compete in the softball program, and agree with the spirit and intent of the softball leagues and the applicable playing rules.

SIGNATURE: _____ DATE: _____

SHIRT SIZE: SM, MED, LG, XL, XXL (SHIRTS MAY BE SMALL)

**THIS FORM MUST BE COMPLETED BEFORE AN APPLICANT CAN PARTICIPATE IN THE
SENIOR SOFTBALL PROGRAM**

**An appropriate fee (\$75.00) can be paid with the completed form submission.
Make check/money order payable to STUDIO 60 Senior Center.
Please mail the registration form and payment to:**

STUDIO 60 Senior Center
Attn: Activities Director
2200 Drake Avenue
Huntsville, AL 35805