

**USR GIRLS RECREATIONAL SOFTBALL REGISTRATION FORM 2015**

**Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**Mother cell:** \_\_\_\_\_ **Father cell:** \_\_\_\_\_

**Email #1:** \_\_\_\_\_ **(print very carefully)**

*All communications are via email therefore providing a legible email address is critical*

**Uniform Preferred size:** YM (youth size 8Y to 10Y) YL (youth 12Y to 14Y) AS (ladies size 6)  
AM (ladies size 9-10) AL (ladies size 12) AXL (ladies size 14-16).

**Will you coach a team?** Yes No **Assistant Coach?** Yes No **Shirt Size:** \_\_\_\_\_

**Will you sponsor a team?** Cost \$300 **Will you sponsor a banner?** Cost \$250 **Both for \$500**

**The cost is \$175.00 per player.** Parents with concerns that their child may be unhappy with a guarantee of 50% playing time or fear injury from a pitched/thrown ball should not participate in softball For financial aid, contact USR Softball..

**Acknowledgement of Potential for Injury and Release of Liability:** As parent/ guardian, I give full permission for my child/ward named above to participate in the USR Softball coach pitched or fast pitch recreational program. I acknowledge that participation in softball involves the possibility of injury. For grades 3<sup>rd</sup> and above, this is a fast pitch league with pitchers throwing windmill so there is a chance of injury from a pitched ball or other event. Based upon a doctor's exam within the last 12 months, my child/ward has no defect or disability ((physical or psychological) which might affect her participation or make her participation hazardous to herself or others.

I acknowledge and understand that risks, including being hit by a ball/bat or other catastrophic injury as well as other damages and losses associated with participation in a softball event. I further agree on behalf of myself, my heirs, and personal representative that USR Softball and the sponsors of any softball sanctioned event along with the coaches, volunteers and officers/directors of the USR Softball Association and the Borough of Upper Saddle River and its officers/directors shall not be liable for any injury or other loss or damage occurring as a result of my child/ward's participation in the event. I hereby absolve and release the USR Softball Association, its officer, officials, managers, coaches and volunteers and the Borough of Upper Saddle River and its officers/directors of liability for injuries to my child/ward arising out of game or practice activities including travel to and from these activities necessary or essential thereto. I hereby give permission for any Association representative to transport or have my child/ward transported to a medical treatment facility and to authorize treatment of my child/ward for any injury or medical matter deemed appropriate by the association representative in my absence. I understand that I will be responsible for any medical fees incurred for the treatment of my child.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Return this form to: Rob Paglieri, 3 Yeoman Drive, USR along with your check made out to USR Softball or at Boro Hall sign-ups in January. Forms must be received no later than Feb 15. After February 1, teams are formed and space may not be available e.g. if coaches are not available or teams have reached their maximum number of players.**

**Are you interested in playing travel softball during June and July? Yes No**  
**A coach will contact you by email and tryouts & practices will start in March. There will be some practices & scrimmages in the Spring and the season starts in June. Additional fees apply.**

**For girls in first and second grade only: Name three or four friends that you would like to play on the same team with and we will try to get you on the same team with one:**

1) \_\_\_\_\_ ; 2) \_\_\_\_\_

3) \_\_\_\_\_ ; 4) \_\_\_\_\_