

RETURN ENTRY FORMS WITH PAYMENT (CHECK OR MONEY ORDER) TO: M.C. PARKS AND RECREATION-ATTN: RECREATION-SIX ON THE LAKE-MICHIGAN CITY, IN 46360. PLEASE CALL 219-873-1506 WITH ANY QUESTIONS.

REGISTRATION FORM

Parent/Adult Name: _____ Home Phone: (_____) _____

Address: _____ Work Phone: (_____) _____

City, State/ Zip: _____ Cell Phone: (_____) _____

LAST NAME PARTICIPANT	FIRST NAME PARTICIPANT	SEX	BIRTHDATE	PROGRAM NAME	PROGRAM #	AMOUNT PAID
			/ /			
			/ /			
			/ /			

TOTAL: _____

WAIVER FOR PARTICIPANT

In consideration of your accepting my entry, I hereby, for myself, my child, my heirs, executors and administrators, waive and release any and all rights and claims for damages I or my child may have against the City of Michigan City, its Park Department, representatives, agents and successors for any and all injuries suffered by myself or my child at any activity sponsored by City of Michigan City. I request that I be permitted to participate in a Michigan City Parks & Recreation Department sports program, league, and/or tournament. I understand my failure to follow all rules imposed by the M.C. Parks & Recreation Department, including all rules imposed by any and all governing bodies and/or sanctions, will be cause for my dismissal from the program, league, and/or tournament. I also understand that there is an element of risk with regard to personal injury involved in my participation in any sporting activity. I understand that the Parks & Recreation Department may take photographs of me and others while we are participating in the program, league, and/or tournament for which I am registering and I hereby assign to the department the right to any photographic image of me obtained during my participation in the program to be used by the department for any purpose related to it's activities.

Having read the above, and after careful consideration, I hereby voluntarily assume all risks inherent in my participation in a M.C. Parks & Recreation program, league, and/or tournament. I further agree that I will indemnify and hold harmless the City of Michigan City, its Park Board and Parks & Recreation Department, the National Softball Association, and all personnel connected therewith, from all liability from any claim that arises out of my participation in said program, league, and/or tournament.

Adult Signature: _____ **Date:** _____

TOTAL AMT. DUE \$ _____ RECEIPT#: _____ DATE PAID: _____ RECEIVED BY: _____

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CUT ALONG DOTTED LINE BEFORE MAILING