

Alcouffe Center Adult Recreational Softball League Sign-up

Name: _____

Mailing Address: _____

Telephone: _____ Cell phone or alternate number: _____

E-mail address: _____ Age: _____

Softball play experience: _____

Are you interested in being on a Committee to administer the softball league? _____

Are you interested in managing a team? _____

Do you prefer Saturdays or Sunday afternoon for games? _____

I would like to play softball in a recreational league and by signing below I attest that I fully understand the risks associated with play and provide the following release of liability:

RELEASE OF LIABILITY

I understand that softball play involves risk of injury with use of balls, bats, running, obstacles, etc. I assume full responsibility in connection with my participation in softball play at the Alcouffe Center Douthit Park facility and hereby release from liability and to indemnify and hold harmless Dobbins-Oregon House Improvement Foundation (DOHIF) and any of its employees or agents representing DOHIF. This release is for any and all liability for personal injuries (including death) and property losses or damage occasioned by, or in connection with, this activity or accommodation for this use.

(Signature)

(Date)

Sign-up fee received _____(DOHIF use only)

Sign, date and fax to 692-9626 or mail to DOHIF, P.O. Box 302, Oregon House, CA 95962.

Questions: Call Greg at 692-9247 or Robert at 692-9625.