

NEBRASKA/IOWA SENIOR SOFTBALL
Friday Morning League
April 19 – September 27, 2024
La Vista Sports Complex • 7346 South 66th St.



Player Registration Form

Please complete this entire form

and mail to: NE/IA Senior Softball

11664 Douglas St 68154-3129

Player Registration runs from March 1 through March 31 of 2024

Last Name: _____ First Name: _____ DOB: ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Preferred Playing Position(s): P C 1B 2B 3B SS LF LCF RCF RF Jersey Size (Circle One): **S M L XL XXL**

I will be a **Team Manager**: () YES () NO I will serve as a **Volunteer Umpire**: () YES () NO

Player Commitment: I will make a commitment to play in () of the 22 scheduled games during the season.

REGISTRATION FEE IS ONLY \$60.00 FOR ALL PLAYERS

Liability Release Statement

I voluntarily, of my own free will, elect to participate in the **2022 Nebraska/Iowa Senior Softball Morning League**, including workout and training sessions. I understand and accept there are risks and hazards associated with softball that may result in injury or death, due to weather, playing conditions, equipment, and/or other participants.

My conduct, both on and off the field, will be positive and professional. I agree to (1) abide by the policies, guidelines, and rules of the **Nebraska/Iowa Senior Softball Morning League**; (2) assist, when needed, in performing assigned duties in connection with League operations including volunteering to umpire; (3) accept the decisions of the team manager, umpires, and Board of Directors in good sportsmanship; (4) neither taunt nor degrade an opponent, teammate or umpire; (5) avoid body contact that may result in injury to others; (6) never direct abusive or profane language at officials or opponents; (7) exercise control over family members and friends as they relate to points 3, 4, and 6 above, and (8) not commit an act that would be considered unsportsmanlike conduct.

My signature serves as acknowledgement and understanding of risks, rules and policies of the **Nebraska/Iowa Senior Softball Morning League** and that all information provided by me is true and rendered in good faith. I agree, accept, and acknowledge the details within the **Player Liability Release Statement** which includes the risks associated with the sport and rules regarding conduct and behavior.

(Print Name) (Signature) (Date)

EMERGENCY CONTACT: In case I incur a serious injury or become ill while playing softball, promptly call 911 and also please contact the following person ASAP:

Name: _____ Relationship: _____ Phone: _____