# Lincoln Hills Senior Softball League – 2017

### Membership is open to Men and Women

### Member Application Instructions:

1- Please complete both pages (attached) and make your Check payable to: LHSSL

2- Applications are due **No Later Than Friday, February 17, 2017** 

3- Give your application (**both pages**) and check to any member of the Board of Directors or mail them to:

Note: Do Not write in this box, for Board use only.		
Wendy G. Green	wendygreenlhssl@yahoo.com	Amount Paid:
69 Lincoln Blvd.	Cell: (530) 329-9264	Check Number:
Ste-A204		Cash:
Lincoln, CA. 95648	Received by:	Date:

# **Member Information**

Disclaimer: Subject to league structure/capabilities/limitations, all players will be afforded an opportunity to play in the League

#### NOTE: Legal residents only. All members will be verified by the L.H. Association.

LAST Name:		FIRST Name:	
Street:		Phone: ( )	
(Important for your communications, <u>print legibly</u> ) Er EMAIL:		Emergency Contact Name:	
		Emergency Contact Phone: ( )	
Age:	Date of Birth:	Home	town for Opening Day Program:

### I - Player Information:

1- Which position do you prefer to play?	Name only <u>one</u> :			
2- Where else can you play?	△ Infield	△ Outfield	△ Pitcher	
3- Would you be willing to pitch with training?	△ YES	Δ NO		
4- Do you want a courtesy runner?	From Plate 🏠 YES 🔹 🛆 NO	From Base 🏠 Y	ES 🛆 NO	
5- Do you want an immediate family member on your team?	If YES, explain:			
6- Please provide dates for absences longer than <b>ONE</b> week April through September.	Dates:			
	If dates unknown, how many total days would you miss:			
7- Enter the last year you played in LHSSL or if this is your first time, enter <b>NEW</b>	Date:			

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# II – Annual Dues for Participation: Check ALL you are paying for $\triangle$

<b>REFUND POLICY:</b> Based on the month you cancel membership	April 100%	May 75%	June 50%	July 0%
If requesting a refund, it must be in writing to the Secretary				

<b>NOTE</b> : All members, with the exception of Non-Playing Volunteers are entitled to play out of the "CAN".				
$\triangle$	A Non-Playing Volunteers	\$1.00	Check all of your interests:	
			△ Manager △ Field Maintenance	
			☐ Umpire ☐ Scoreboard Operator	
	B Sunday's ONLY	\$20.00	This entitles you to: (1) Sunday Practice ONLY	
$\triangle$	C Traveling Tournament	\$30.00	This entitles you to: (1) Sunday Practice (2) Fall League	
	Team Member, <u>NOT</u> playing in		NOTE: (1) Tryout required, plus additional costs if making the	
	Summer League		team. (Example: tournament entry fees)	
			(2) Thursday League by invitation, additional fee required for	
			non-traveling team members.	
	D Summer League Annual	\$50.00	This entitles you to: (1) Sunday Practice, (2) Summer	
	Dues		League, ( <b>3</b> ) Fall League, ( <b>4</b> ) A tryout with a traveling	
			tournament team, (5) Any volunteer position below	
			Check all of your additional interests:	
			△ Manager △ Field Maintenance	
			☐ Umpire ☐ Scoreboard Operator	
	E Fall League	\$25.00	This entitles you to: (1) Fall League (2) Sunday Practice	
	Total Due		<b><u>NOT</u></b> to exceed \$50.00 All applications <i>must</i> be signed below	

This is a general release of liability. Please read carefully before signing.

SINCE SOFTBALL CAN BE DANGEROUS, THE LINCOLN HILLS SENIOR SOFTBALL LEAGUE (LHSSL) REQUIRES ALL PARTICIPANTS TO ASSUME ALL RISKS BY SIGNING THIS GENERAL RELEASE FORM (ABOVE).

For and in consideration of being permitted to participate in LHSSL team activities, I hereby voluntarily release, discharge, waive, and relinquish any and all claims or actions for damages, personal injury, death, or property damage which I may have, or which may hereafter occur to me, as a result of my participation in senior softball activities during play and while I am at facilities while others play or for any other reason. This release is intended to discharge, in advance, the LHSSL, and SCLHCA, its officers, members, and employees.

I further understand that serious accidents occasionally occur during softball activities and that participants occasionally sustain serious personal injuries, death, or property damage as a consequence thereof. I understand that the league does not provide medical insurance. Knowing the risks, I have voluntarily applied to participate in the activity and hereby agree to assume those risks and to release the LHSSL, and SCLHCA, its officers, members, and employees who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages.

I further understand and agree that this release, discharge, waiver, and assumption of risk are to be binding on my heirs, executors, administrators, and assigns.

I further agree to indemnify and to hold harmless the LHSSL, and SCLHCA, its officers, members, and employees from any loss, liability, damage, cost, or expense that I may sustain while participating in the activity.

I further agree to abide by the Bylaws and the Rules and Regulations of the Lincoln Hills Senior Softball League. I have read this General Release and understand that I give up substantial rights by signing it and sign it voluntarily.