

Games Played at Eastern University - Wayne Pa

2023 - 7 v 7 Summer Field Hockey League

## **TEAM & INDIVIDUAL REGISTRATION FORM**

<b>Registering:</b>	Position:	vard 🗆 M	id 🗆 Back 🗆 Goalie
Check Division:  Youth High S Middle School	School - Level 🔵 V	∖NL	🗀 Adult / Collegiate
Team Name (if already on a team):			# of Players
Contact's Name (if registering as a team):			
Contact's Email:	Cell Phone #		
Players Name:			
Street Address:			
City:	State:	Zip:	
Cell Phone:			
School Name:			
Players Email:			
****Email will be used as the primary form of cor	nmunication - <u>Please pr</u>	<mark>rint email ad</mark>	dress CLEARLY
PAYMENT INFORMATION			
☐\$1090 – Team (all divis Registration Ends: May 2 <sup>2<sup>nd</sup></sup>	ions) ** Minimum 10 pe two rosters with	r team. Playe out paying tw	Adult House Team ers CANNOT register to play on vo registration fees ream Roster Form
Payment: Check #	_ Cash	Date P	aid
Please Return This Form To:	* Make check payabl	e to "Viper	Field Hockey"
Viper Sports Club* 832 N Lewis Road Limerick, PA 19468	* Credit Card Payment <u>includes a convenience fee</u> : <b>\$120 for Individuals / \$1120 for Teams</b> Card Type: VISA MASTER CARD		
Questions? Email – viperfieldhocke@comcast.net			
** <u>ALL</u> payments to the Viper Sports Club are <u>non-refundable</u> unless a program is cancelled by the Viper Sports Club due to insufficient participation			_State Zip
**ALL credit card payments are done through the Viper Sports Club Square account and Includes a <u>Convenience Fee</u> Code			
ASSUMPTION AND RELEASE OF LIABILITY: Contact sports are inherently d "Participant") hereby: (1) assume the risk of personal injury, property damage, or Club; (2) release BH Championship Sports, LLC, Viper Sports Club, and its age all liability, claims, or responsibility for Injuries to Participant; (3) grant permissio Sports from Injury arising from any good faith acts or omissions in emergency si take whatever action is necessary, in their best judgment, in an emergency and officers from any responsibility or liability related thereto. I agree that you may p visual images in future literature for Viper Sports Club without compensation to without limitation in advertising and promoting the Viper Sports Club. I represen- release contained there in binds me and the minor of all of its terms	r other loss (collectively "Injuries") to t nts, employees, staff members, office n for Participant to participate in activi ituations. I authorize BH Championshi I hereby release discharge BH Cham hotograph and/or videotape my child my child or me. I further agree that you	the Participant arisin rs, directors and me ties at BH Champio p Sports, its agents pionship Sports, its or I during sports ac u may use my name	ng from or related to activities by the Viper Sports embers(collectively "BH Championship Sports") from inship Sports; and (4) release BH Championship , employees, staff members, directors and officers to agents, employees, staff members, directors and tivities and that you retain the right to use these e, my child's name, or any testimonials made by us
Signature (Parent if under 18yrs)			Date
FOR OFFICE USE ONLY: Date Deposited Am	ount PaidChe	ck No	Square Payment Date: