MOLSON SLO-PITCH / SLO-PITCH NATIONAL
RELEASE OF LIABILITY & ASSUMPTION OF RISK AGREEMENT
2019 Tournament Entry Form

Deadline for Entries: _____ **Return to:** _____

Choose the division and category your team is requesting to enter:	Mens: A B C D E	*Mens Masters:* *35+Comp* *35+C* *35+D* *35+E* *50+Comp* *50+IM* *50+E* *60+*
	Womens: A B C D E	Womens Masters: 35+Comp 35+IM 50+
	Coed: Comp C D E	+45 Other:

Team Name: _____ **City the team represents**: _____
Team Contact: _____ Address: _____ Postal Code: _____
❑ Male ❑ Female Tel. – Res.: ____ _____ Bus: ____ _____ Ext.:_____ Fax: ____ _____ **EMAIL:** _____
Alternate Contact: _____ Address: _____ Postal Code: _____
❑ Male ❑ Female Tel. – Res.: ____ _____ Bus: ____ _____ Ext.:_____ Fax: ____ _____ **EMAIL:** _____
League: _____

MANDATORY: 2019 SPN REGISTRATION NUMBER (or Temporary Number): _____

All participants registered with Slo-Pitch National shall be considered members. All members agree, through participation, to accept the rules set forth by Slo-Pitch National in the rulebook.

Other Team Names used or Team Name last year: _____ Last Tournament Entered: _____ Results: _____

PLEASE PRINT CLEARLY – email addresses are MANDATORY

Players Name Last Name/First name/Initial (*Note: Maximum 14 prizes per team)	**Players Signature**** For release of liability & assumption of risk **(Must be 18 years of age to sign**)**	**Date of Birth** Month/Day/Year	**Players Email Address** ***MANDATORY***	***Telephone #*** include area code	***Highest Level Played***
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15*					
16*					
17*					
18*					
19*					
20*					

Release, Waiver & Assumption of Risk Agreement - In consideration of my being allowed to attend at or participate in any way in this slo-pitch tournament, I warrant that I am physically fit to participate and of legal age and competent to sign and agree that a benefit is realized by me through attendance at Slo-Pitch National Softball Inc. (hereinafter called "SPN") events and I hereby for myself, my heirs, executors, administrators, successors and assigns release from liability and agree to indemnify and hold blameless the promoters, all other participants, officials, sponsors, advertisers, league executive, owners and/or operators of the premises and facilities (including without limitation SPN and Molson Canada), and each of them and any of their agents, employees or representatives or otherwise, during my participation and/or attendance at the event. In addition, I agree to, at all times, inspect equipment, playing fields, premises and event-related facilities for possible risk and determine for myself that conditions are acceptable for me to commence or continue participation and/or attendance. I also agree my participation and/or attendance, commencing or continuing, indicates acceptance of equipment, fields, premises, et al, and I knowingly and freely assume all risks and full responsibility for my participation and/or attendance, commencing or continuing AND I hereby grant SPN and their agents the irrevocable right to use my name, face or other likeness for any and all purposes. I am fully aware that SPN carries no medical or liability insurance for any participants or attendees and that I am solely responsible for securing my own insurance. **Must be 18 years of age to sign or attach letter from parent/guardian signing "Release & Waiver" on behalf of minor; for safety reasons, no consideration will be given to anyone under 16 years of age. **NOTE: ALL TEAM PLAYERS, INCLUDING COACHES AND MANAGERS ARE CONSIDERED RESPONSIBLE AND MAY BE HELD LIABLE FOR ANY TEAM ATTEMPTING TO ENTER IN A LOWER DIVISION, USING INELIGIBLE OR FRAUDULENTLY REPRESENTED PLAYERS, FOR ABUSE, MISUSE, UNSPORTSMANLIKE CONDUCT, FRAUD OR CONDUCT CONSIDERED BY SPN TO BE DETRIMENTAL TO THE SPORT AND/OR SPN AND ITS REPRESENTATIVES.**

THIS FORM IS NOT TO BE CONSIDERED CONFIRMATION OF TEAM CALIBRE. TEAM RANKING MAY BE CHECKED WITH ANY SPN CO-ORDINATOR OR DIRECTOR.