The Christian Center
Summer Baseball/Softball 2027

OFFICE USE ONLY
Amount Pd. _____
Gid. _____
Sch. _____
Fundr. _____
Payment Type _____

Little Sluggers (Co-Ed):

Must be 5 by June 1, 2027

❑ Little Sluggers (5-6 yrs)

Girls Fast Pitch Softball

Age as of January 1, 2027

❑ **All Star League** (7-9 yrs)
❑ **MVP League** (10-13 yrs)
❑ **Hall of Fame** (13-18 yrs)

Boys Baseball

age as of April 30, 2027

❑ **Rookie League** (7-8 yrs)
❑ **Minor League** (9-10 yrs)
❑ **Major League** (11-12 yrs)
❑ **Pony League** (13-15 yrs)
❑ **Colt League** (16-18 yrs)

** A player may be placed in a more advanced league based on an evaluation.*

Cost: **UNTIL** February 8

First sibling pays	$100	❑
Second sibling pays	$95	❑
Third + siblings pay	$90	❑

Cost: **AFTER** February 8

First sibling pays	$105	❑
Second sibling pays	$100	❑
Third + siblings pay	$95	❑

SKILL LEVEL (Circle One)

1	2	3	4	5
Outstanding	Skilled	Average	Below Average	Not Athletic

Please circle your participant's shirt size:

YS YM YL AS AM AL AXL AXXL AXXXL

**If a player withdraws from the league, a $10 cancellation fee will be deducted from your refund.*

Each participant must have a separate form. Please print neatly.

PLAYER'S NAME : _____ CIRCLE ONE: MALE / FEMALE

BIRTHDATE: _____/_____/_____ PHONE: _____ GRADE: _____

ADDRESS: _____CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ ALTERNATIVE EMAIL: _____

FATHER'S NAME: _____ PHONE: _____
Star preferred contact*

MOTHER'S NAME: _____ PHONE: _____
Star preferred contact*

ADDRESS IF DIFFERENT FROM PARTICIPANT: _____

PLACE OF EMPLOYMENT FATHER: _____ MOTHER: _____

EMERGENCY CONTACT & PHONE: _____
Separate from Parent

SCHOOL ATTENDING: _____ CHURCH ATTENDING: _____

CONDITION OF YOUR CHILD'S HEALTH?
(anything the coach should be aware of, like an allergy?) _____

IS YOUR CHILD ON ANY SPECIAL MEDICATION? CIRCLE ONE: YES NO

IF SO, WHAT? _____ FOR WHAT? _____

Did your child play Christian Center Baseball /Softball League last Summer or Fall? Circle One: YES NO

If yes, what team? _____ What league? _____

Name of Sibling in the same League: _____ *(Siblings in the same league will be placed on the same team)*

TEAMMATE REQUEST (ONLY one request permitted) _____

~ This friend must also request your child on their form.
~ Requests will be considered by the Athletic Director in the best interests of the league.
*~ **Teammate requests are NOT guaranteed.***

→ Please read & sign the back of this

The Christian Center Sports Program

Release, Waiver of Liability and Indemnity Agreement

The undersigned hereby enters The Christian Center Ball "Program", and desires to participate in practices, games and related activities carried on by said Program. The undersigned recognizes and acknowledges that there are certain risks of physical injury present, but in consideration hereof hereby agree to assume the full risk of any such injury, including but not limited to the following: sickness, exposure to infectious/communicable disease, bodily injury, death, emotional injury, personal injury, property damage, and financial damage in consideration for the opportunity to participate in The Christian Center Ball Program, and participation in any and all activities connected with or associated with the Program. In further consideration hereof, the undersigned, their heirs, executors, administrators, successors and assigns, hereby release, waive, discharge and covenant not to sue The Christian Center, Inc., its officers, directors, committee members, successors, attorneys, agents and employees (hereinafter referred to as "releases") from any and all liability to the undersigned, their heirs, executors, administrators, and assigns, for loss or damage of whatsoever kind or nature on account of or arising out of an injury to the person or property or resulting in death as stated above, whether caused by the negligence or wrongful conduct of the releases named herein or otherwise, while participating in or in attendance at any ball game, practice, training session, fundraising event or award trip, on Christian Center property or elsewhere, including but not limited to any such injury, property damage or death incurred while travelling to and from any such event. In further consideration hereof, the undersigned, their heirs, executors, administrators, successors and assigns, hereby agree to indemnify and hold harmless the releases named herein from any and all loss, liability, damage or expenses, including attorney fees and costs, that they may incur due to any such injury to the person or property or resulting in death, as stated above, whether caused by negligence or wrongful conduct of the releases named herein or otherwise. In case of accident or illness, the undersigned hereby authorizes THE CHRISTIAN CENTER to approve emergency medical treatment provided by qualified medical personnel. The undersigned has read and fully understands the above Release, Waiver of Liability and Indemnity Agreement, and further agrees that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration of participating in all sports, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence the Louisville Slugger Sports Complex and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Release's"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that all sports involve known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments, bruises, and other bodily injuries as serious as death, disability or blindness, caused by contact with baseballs, bats, other participants, or structures like walls or fences, or caused by uneven ground, medical conditions resulting from physical activity, and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the releases. My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless releases from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should releases or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume - and bear the costs of - all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so solely in the state where releases' facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. I have read and understood this document and I agree to be bound by its terms.

I give my permission for _____to participate in The Christian Center's Athletic Program, and consent to the use of photographs of my minor/child. In Christian Center brochures, social media, advertisements, etc.
(*No names will be used without permission of a parent or guardian.)*

_____ **Date:** _____

Signature (Parent / Guardian if participant is a minor)