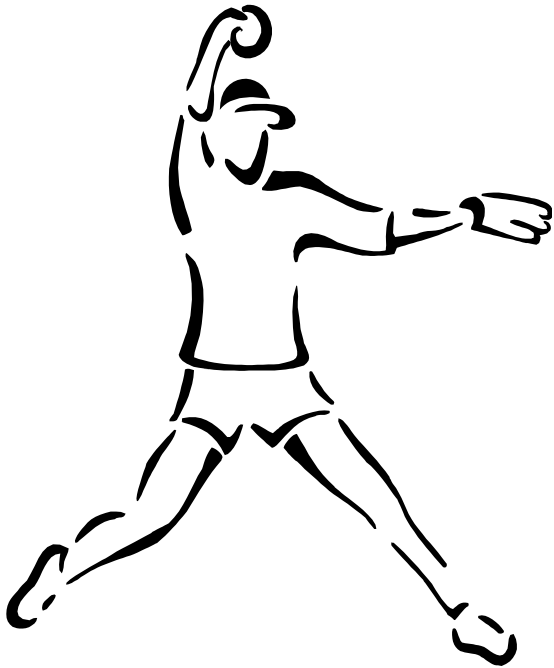




Beginner and advanced players welcome.

2017 Girls Softball Fall League

Online registration is now live. Register by July 14th



Enjoy the fall weekends with your old pals & new school friends!

Volunteer coaches needed!

GIRLS FALL FASTPITCH SOFTBALL

WHO: Going into 7th & 8th Grade
Going into 5th & 6th Grade
Going into 3rd & 4th Grade
Going into Pre-K – 2nd Grade

WHEN: Saturdays & Sundays
August 19 – October 29

FEE: Res - \$90 / Non-Res - \$113

FULL TIME TRAVEL & HOUSE LEAGUE TEAMS ARE ACCEPTED. TEAMS WILL BE DIVIDED UP INTO TWO DIVISIONS. You must play in the division of the grade your oldest girl is going into for the 2017-18 school year. **Teams that sign up with 12 or more of their own players won't have anyone added to them.** Teams will play 8 games on weekends only. Volunteer coaches are needed. All players will receive a jersey and visor that must be worn to all games. Divisions may be combined depending on enrollment.

**Registration deadline is July 14th.
Games begin August 19th.**

Any questions, please call the Athletic Offices @ 847-967-1529.

*Register at the Howard Leisure Center,
6676 W. Howard Street
Niles, IL 60714*

Girls Softball Registration Form



Primary Household Contact (Last Name) _____ (First Name) _____

Address _____ City/Zip _____

Home Phone _____ Emergency Phone _____ Cell Phone _____

Email Address _____

Please check (x) if you need special accommodations to participate in this program. ↑ _____

Player's Name	Birthday	Spring/Summer League	Jersey Size

TEAM / TEAMMATE REQUEST INFORMATION

1) I am on a team _____
 Coach name: _____ Phone _____

2) I'm a Free Agent, please place me on a team _____
 Teammate requests: _____
 I'm interested in coaching my daughter _____

Please circle the correct league
 (Grade you're going into in the fall of
 2017)

7th & 8th Grade
 420311-01

5th & 6th Grade
 420311-02

3rd & 4th Grade
 420311-03

Pre K - 2nd Grade
 420311-04

FEE - Res - \$90 / Non-Res - \$113

(\$25 late fee after 7/14/17
 pending Athletic Department
 approval)

Method of Payment

Cash _____

Check # _____

MasterCard / Visa / Discover

Name: _____ Exp. Date: _____
 (as it appears on card)

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Card Number

Signature: _____ Amount: _____ **Coaches should download a coach packet @ www.niles-parks.org**

Remit to:
 Niles Park District
 Registration
 6676 W. Howard St.
 Niles, IL 60714

*Fax to Howard Leisure Center at (847) 583-0827.
 *Email to robin@niles-parks.org
 *A self-addressed envelope must be enclosed in order to receive a receipt.

WAIVER AND RELEASE OF ALL CLAIMS Please read this form carefully and be aware that in signing up and participating in this program you will be waving and releasing all claims for injuries you might sustain arising out of this program.

Please read this form carefully and be aware that in signing up and participating in the above identified programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services/vehicle operation, when provided.) I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of participating in all these programs/activities against the Niles Park District, including its officials, agents, volunteers and employees (here-in after collectively referred as "District"). I do hereby fully release and forever discharge the District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of connected with, or in any way associated with these programs/activities. If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effects as an original form signature. Additionally, by signing this form, I am certifying that I qualify for the rate charged (i.e. if resident rate was charged, I am/my children are residents of the Niles Park District). If this is proven untrue, I realize that my park district privileges may be suspended or revoked. Photos are periodically taken of participants in a class, during a special event or at the District's parks. Please be aware that these photos are for Park District use only and may be used in the District's publications. I have read and fully understand the above important, warning or risk, assumptions of risk and waiver and release of all claims.

PLEASE PRINT Participant's Name _____

Parent/Guardian Signature _____ Date _____