

BENMILLER SOFTBALL

2022 REGISTRATION FORM



REGISTRATION DEADLINE: MARCH 31, 2022

*** After the March 31st deadline, registration costs will increase by \$30.00 ***

PLEASE SUPPLY A COPY OF EACH CHILD'S BIRTH CERTIFICATE FOR ALL NEW PLAYERS

LEVEL					COST
U5 (T-BALL)	Born in 2017/2018/2019	_____			\$ 25.00
U7 (PREMITE)	Born in 2015/2016	_____			\$ 55.00
U9 (MITE SQUIRT)	Born in 2013/2014	_____			\$ 55.00
U11 (SQUIRT)	Born in 2011/2012		BOYS _____	GIRLS _____	\$ 60.00
U13 (PEEWEE)	Born in 2009/2010		BOYS _____	GIRLS _____	\$ 60.00
U15 (BANTAM)	Born in 2007/2008		BOYS _____	GIRLS _____	\$ 65.00
U17 (MIDGET)	Born in 2005/2006		BOYS _____	GIRLS _____	\$ 65.00
U19 (COED SLO PITCH)	Born in 2003 to 2008	_____			\$ 70.00

Family Rate: If you have 3 or more children in a family registering for regular league, \$5.00 per child will be deducted off of the regular rate.

Payment can be made via electronic money transfer to treasurer@acwtownship.ca. When submitting payment, please include your name, the registrants name, and the program name (Benmiller Softball).

Cheques may also be mailed to the Township of Ashfield-Colborne-Wawanosh, 82133 Council Line, Goderich, ON N7A 3Y2. A post-dated uniform deposit cheque of \$30.00 (Dated August 31, 2022) payable to the Township of Ashfield-Colborne-Wawanosh, must be submitted to the coach prior to receiving your uniform.

REGISTRANT INFORMATION

Last Name: _____ First Name: _____

Date of Birth (mm/dd/yy): _____ Telephone #: _____

Home Address: _____

Parents Names: _____ Email: _____

Emergency Contact Info: _____ Telephone #: _____

Health Issues/Concerns: _____

Uniform: Youth sizes: Small ☐ Medium ☐ Large ☐ X-Large ☐
Adult sizes: Small ☐ Medium ☐ Large ☐ X-Large ☐

Would you be interested in coaching or assisting with any of the above teams? Yes ☐ No ☐ Level

Waiver of Liability, Assumption of Risk and Indemnity Agreement

1. I am fully aware of the inherent risks and hazards that result from my attendance at the Benmiller Ball Diamond and/or any Facility or Park maintained by the Township of Ashfield-Colborne-Wawanosh. Furthermore, through my use of such Ball Diamond, Facility or Park, I voluntarily, knowingly, and freely assume all such risks including, but not limited to, risks resulting from my own actions or inactions, the actions or inactions of others or their staff and/or volunteers, falls, injuries, illnesses, death, contraction of infectious or communicable diseases, as well as any and all obstacles and defects of the Facility.
2. I understand and expressly assume all dangers of activities while participating and /or attending the Ball Diamond, Facility or Park. I also shall identify and inform Township Staff of any hazardous or dangerous equipment or conditions jeopardizing the safety of myself or guests thereof and waive all claims arising out of the activities at the Ball Diamond, Facility, Park or other areas maintained by The Township of Ashfield-Colborne-Wawanosh, whether caused by negligence, breach of contract, or otherwise, for any bodily injury, property damage, or loss otherwise.
3. I shall defend, indemnify, and hold harmless The Township of Ashfield-Colborne-Wawanosh including but not limited to, any officials, directors, agents, employees, or affiliates, against any and all losses, damages, liabilities, deficiencies, claims, actions, judgments, settlements, interest, awards, penalties, fines, costs, or expenses of any kind, including reasonable legal fees and disbursements, and the costs of enforcing any right to indemnification under this Agreement, and the cost of pursuing any insurance providers, arising out of or resulting from any claim related to the Renter's use of the Ball Diamond, Facility or Park.
4. I, for myself and on behalf of my heirs, assigns, personal representatives, legal guardians and next of kin, hereby release and hold harmless the releasees with respect to any and all illness, disability, death, or loss or damage to persons or property, whether arising from the negligence of The Township of Ashfield-Colborne-Wawanosh or otherwise, to the fullest extent permitted by law.
5. I understand that smoking cannabis or tobacco and the vaping of any substance is strictly prohibited on and within 20 meters of the Ball Diamond, Facility or Park. This includes all areas and rooms, as well as any vehicle parked in a Township owned parking lot. In addition to this, smoking cannabis or tobacco and the vaping of any substance is strictly prohibited on and within 20 meters of the perimeter of any Ball Diamond, Facility or Park and spectator area maintained by The Township of Ashfield-Colborne-Wawanosh. I understand that failure to abide by this may result in an immediate suspension from entering any facilities and/or properties maintained by The Township of Ashfield-Colborne-Wawanosh. Furthermore, I also understand that I may be subject to a fine(s) from the Huron-Perth Public Health Unit if smoking and/or vaping occurs on or within 20 meters of the Ball Diamond, Facility or Park.
6. I understand that unlicensed alcohol is strictly prohibited at the Ball Diamond, Facilities or Parks and other areas owned by The Township of Ashfield-Colborne-Wawanosh (excluding the Benmiller Community Hall where a Special Occasions Permit has been obtained). Consumption of unlicensed alcohol may result in the immediate termination of any rental I am involved with and may result in charges/fines from the Police.
7. I knowingly and freely assume all such risks, both known and unknown, and assume full responsibility for my participation, as well as my actions. I understand that should my actions cause damage to the Benmiller Ball Diamond, Facility, Park or any other properties and items owned or maintained by The Township of Ashfield-Colborne-Wawanosh, that I will be held fully accountable for my actions. This may include, but not be limited to, providing monetary compensation for damages or loss of income occurring from my actions.
8. I authorize the use of any photo taken while participating in the above program.
9. I fully understand and agree that placing my signed consent on this waiver will bind me to the terms of the waiver for future events similar in nature for a period of not less than one (1) year from the date of consent.

I, _____ (Print Name of Parent or legal guardian) fully understand, acknowledge and accept the aforementioned terms and hereby provide consent by way of my signature below. By placing my signed consent, I also fully understand, acknowledge and accept the risks involved and give consent for _____, hereinafter "my child", to participate in the aforementioned program. By enrolling myself or my child, I represent that I, or my child, is physically fit and able to participate in such activities and understand the risks associated with such activities.

(Name of Parent or Legal Guardian)

(Signature of Parent or Legal Guardian)

Date (mm/dd/yy)

Personal information is collected in accordance with the Municipal Freedom of Information and Protection of Privacy Act and will only be used for the purpose of creating a record of program registration and/or a record pertaining to Waivers of Liability, Assumption of Risk and Indemnity Agreements. Questions regarding the aforementioned collection of personal information may be addressed to The Township of Ashfield-Colborne-Wawanosh by emailing admin@acwtownship.ca or calling 519-524-4669 ext. 205.