MER	IDIAN 7
	IDAHO

Check #:

Date paid:

received by the deadline and still have available spots open.)

Cash:

Player Registration and Waiver Form

INSTRUCTIONS: All fields are required. To register for the 2025 Meridian Del Drake Senior Wood Bat Softball League. Return the filled-out registration form with your player fees to the Meridian Parks and Recreation Office by:

Wednesday, March 12th, 2025 by 5 p.m., call after deadline to see if still space. Paperwork and payment must be

games playoff in Player Fees: Monday Night @ *After deadline	Septe	ember/ \$75 🗖	October T	er on a luesda;	Saturd y Morn	lay at I ing @ S	Discovery ettlers -	7 Park - \$75 🔲	DP #5.)			d Champions g @ Settlers -	
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Date of Birth:	ER 8	RE CEI				_ SI	nirt Size:	Large	XL	2	XL		
WAIVER AGREEMEN' which are unknown. I a the City, its agents and tortious conduct of City aid, emergency medica activity. I understand that as a result of participat conditions beyond the promotional purposes.	igree t emplo 's age al care nat I ar ing in t contro I unde	o assumoyees from the and/or modely this active of the Cerstand to open assumous the active of the a	ne all knom all resemble to hospital responsivity. I acceptal to the control of t	own and eal or poses, regulization to sible for knowled approva	d unknownssible clardless of treatrany and dige that to the public of this a	on risks a aims for of the ma nent of ir all expe the activi- olication a agreeme	associated damages anner by w njuries or il nses that a ity may be and/or use nt means i	with my or other hich suc lness that are incur cancele of any p hat I car	participat harm to p th claim m at I sustain red as a r d with or w photograp nnot later	ion. I he erson or ay be be while of while of without response or recorning a contract of the	ereby rele reproperty rought. I or as a re any injur- notice to cordings claim aga	ease and forevery not attributable consent to and esult of participacy or illness incume, due to unforme by the Ciainst the City, its	er discharge e to the authorize fir ting in this rred while o preseen ty for
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Mail-In - Mail your completed registration form with payment to 33 E. Broadway Ave., Suite 206, Meridian, ID 83642. (Must be

Payment Method (Office Use Only)

____Amount Paid:_____City Receipt Number:_____ Received By:_

_____Credit Card:_____In Person or Phone:_