



Name : _____ E-Mail Address : _____
 Gender (M/F) _____ Home Phone : _____
 Address : _____ Work Phone : _____
 City : _____ Cell Phone : _____
 State : _____ Zip : _____ Date of Birth : _____ Age: _____
 Team or League Affiliation : _____

Name of Parent or Guardian (for minors): _____

Please check categories that apply:

- | | | |
|---|--|---|
| <input type="checkbox"/> Men's Baseball | <input type="checkbox"/> Women's Softball | <input type="checkbox"/> Men's Softball |
| <input type="checkbox"/> Boys High School | <input type="checkbox"/> Girls High School | <input type="checkbox"/> Baseball Coach |
| <input type="checkbox"/> Boys (6-14) | <input type="checkbox"/> Girls (6-14) | <input type="checkbox"/> Softball Coach |
| <input type="checkbox"/> Little Sluggers (5U) | <input type="checkbox"/> Birthday Party | <input type="checkbox"/> Aerobics |
| <input type="checkbox"/> Soccer | <input type="checkbox"/> Other – please list _____ | |

Emergency Telephone No: _____

List Any Health Issues That Would Be Important to Know in Case of Emergency:

RELEASE OF LIABILITY

Participating in sports activities, such as those offered at The Sandlot-BWI, increases an individual's inherent risk of bodily injury. In practicing at The Sandlot - BWI, the participant understands that he/she attending the programs and using The Sandlot - BWI and the facilities does so at his/her own risk. The Anne Arundel Sandlot Academies, LLC and its owners, employees or agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant with his/her family or team in or about any programs on the premises. Participants and parents assume full responsibility for all injuries and damages which occur in or about any programs on the premises. He/She does hereby fully and forever release, discharge, and hold harmless Anne Arundel Sandlot Academies, LLC, all associated facilities and its owner, employees, and agents from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility. In addition, he/she agree(s) to follow the rules of conduct and play set by The Sandlot - BWI. Failure to do so may result in suspension from participation.

Consent: I, the undersigned participant (parent or guardian signature required for participants under the age of 18), do hereby grant authority to the staff at The Sandlot-BWI to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby authorize The Sandlot-BWI and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional materials or team films.

Participant (Parent/Guardian for participants under the age of 18) Signature: _____

Date: _____