

MANOA MAKULE SOFTBALL LEAGUE
New Player Registration

YEAR: _____

TEAM: _____

I, the undersigned, certifies that the information below is correct and meets the prescribed requirements of the constitution of the Manoa Makule Softball League (MMSBL) and in the games and activities of the MMSBL, I hereby agree to remise, release and forever discharge the MMSBL from any and all claims or demands due to injury as a result of said participation.

Name: _____

Address: _____

Phone Number: _____

Date of Birth: _____

Signature: _____

I certify that the information is correct to the best of my knowledge and meets the requirements of the league constitution.

Manager's Signature: _____

Date Submitted: _____