



Jennie Finch
Instructional Softball Clinic
Saturday, March 24, 2018
9AM – 3PM



REGISTRATION FORM



Participant Name: _____

Address: _____ City: _____ State: _____

Contact Phone #: _____ Age (as of 1/1/2018): _____ Date of Birth: _____

T-Shirt Size: _____YS _____YM _____S _____M _____L _____XL

Primary Contact Email Address: _____

Emergency Contact: _____

Relationship to Participant: _____

Emergency Phone Number: _____

**All participants must complete a registration form in order to participate in this Liberty Arena Event.*

**All participants are required to complete a waiver in order to participate in this Liberty Arena Event.*

Please select the Age Division that you are registering for the event:

_____ 12 and Under. Morning Session. _____ 13 and Over. Afternoon Session.

Clinic Fees: \$125/before February 28, 2018 \$150/on or after March 1, 2018

Please submit payment via check to: The Liberty Arena
c/o Jennie Finch Clinic
315 Hepburn Street
Williamsport, PA 17701

**If paying by credit card, please contact The Liberty Arena at 570-980-9963.*

**Payment can also be paid in person via check, cash or credit card at The Liberty Arena.*

Name of Parent/Guardian: _____

Signature: _____ Date: _____

Liberty Arena, Inc.

Assumption of Risk and Release of Liability waiver

INDIVIDUAL AGREEMENT:

I, _____, intend to use or participate in some or all of the activities, facilities, equipment, programs and services offered at or at Liberty Arena.

- 1) In consideration of gaining membership or being allowed such use or participation at Liberty Arena, in addition to the payment of any fee or charge, I do hereby waive, and release and forever discharge Liberty Arena and its owners, officers, agents, employees, representatives, executors, successors and assigns from any and all responsibilities or liability for injuries or damages resulting from any participation in any aspect of any activities or programs or my use of equipment or machinery in Liberty Arena's facilities or arising out of any activities or events occurring at the Liberty Arena.
- 2) I understand and am well aware that strength, flexibility, fitness, exercise and sports activities, including the use of equipment, is potentially hazardous and there is the risk of injury and even death. I also understand that everyone (including myself) has a different capacity for participating in physical activities. I am also aware that all activities, facilities, programs and services at the Liberty Arena are educational, recreational, social, or self-directed in nature. Knowing that, I agree that my participation in any and all of the activities at Liberty Arena is strictly voluntary and has not been requested or required by Liberty Arena. I further agree that my participation in any and all of the activities at Liberty Arena is at my own risk and that I assume any and all risk of injury, illness, damage or loss that might result. I also agree to assume all risk of damage, loss of theft to or of any of my personal property.
- 3) I hereby declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity or other illness that would prevent my participation in any of the activities at the Liberty Arena. Accordingly, I do hereby assume all responsibility for my participation in such activities, programs, facilities and services, as well as for my use of any and all equipment and machinery in connection with them.
- 4) For valuable consideration received, I grant to Liberty Arena Inc. ("Photographer") and their legal representatives and assigns, the irrevocable and unrestricted right to use and publish photographs of me, my children or my team players, or in which I may be included, for editorial, trade, advertising, and any other purpose and in any manner and medium; and to alter and composite the same without restriction and without my inspection or approval. I hereby release Photographer and his/her legal representatives and assigns from all claims and liability relating to said photographs.
- 5) Finally, I understand that the activities, facilities, equipment, programs and services offered at the Liberty Arena may sometimes be conducted by persons who may not be knowledgeable, licensed, certified, or registered instructors or professionals. I accept the fact that the skills and competencies of Liberty Arena employees, agents, representatives or volunteers will vary according to their training and experience. I also understand that no claim has been or is being made by Liberty Arena to offer assessment or treatment of any mental or physical disease or condition by those who are not duly licensed, certified or registered and employed by Liberty Arena to provide such professional services.

Liberty Arena, Inc.

PARENT/GUARDIAN-CHILD AGREEMENT:

I, _____, hereby giving my consent and permission for my child/children.

- 1) To be an active member of the Liberty Arena and to participate in the activities and programs for which they are registered. I understand that under certain circumstances they will be able to work out or participate in activities without direct supervision. I acknowledge that I am responsible for their actions and that if they are not demonstrating proper usage of machines, facilities or equipment or exhibiting proper behavior, they will face appropriate disciplinary actions. I understand that the Liberty Arena is a family atmosphere and that my child/children need my support, motivation, encouragement and supervision to succeed in a fitness or sports program, and I agree to provide it.

By signing below, I affirm, understand and agree to the above terms in their entirety.

Signature

First Name: _____ Last Name: _____ Date: _____
Birth Date: _____ Phone: _____ Email: _____

ENTER FULL NAME AND BIRTH DATE OF ALL FAMILY MEMBERS UNDER THE AGE OF 18

#1	First Name: _____	Last Name: _____	Birth Date: _____
#2	First Name: _____	Last Name: _____	Birth Date: _____
#3	First Name: _____	Last Name: _____	Birth Date: _____
#4	First Name: _____	Last Name: _____	Birth Date: _____