

**Blueberry Community League
Funball Registration**

Player Name: _____ Male ___ Female ___

Parents: _____

DOB: ____/____/____ (day/month/yr) Age (as of April 1 20/__) _____

Alberta Health Care: _____

Address: _____

Phone: hm: _____ cell: _____ work: _____

Please indicate which number is best to reach you at

Email: _____

Email: _____

Please indicate which email is best to reach you at

BBBCL Membership#: _____

BINGO Date: _____

Are you willing to Coach: Y N

**MUST BE A MINIMUM 4 YEARS OLD AS OF APRIL 1/20__ TO BE ELIGABLE TO PLAY
(If participant is under age, this release form must be signed by a parent/guardian.)**

I hereby remise, release and forever discharge the sponsoring Community Association, its successors or assigns, its employees, agents, or contractors, of and from all manner of action, cause or causes of actions, claims or demands which against the sponsoring community association, its successors or assigns, its employees, agents, or contractors of the participants of Blueberry Sports programs sponsored by Parkland Fun Ball League, or in any way arising out of accident occurring in the course of a programs or in any other manner whatsoever.

SIGNATURE: _____

PRINT FULL NAME: _____

*****THIS RELEASE MUST BE SIGNED*****