



Village of Blissfield – Parks and Recreation Department  
**Adult Softball League**



**When:** Thursday Nights  
(August 17 through September 28)

**Where:** Ellis Park Field

*Registration Deadline: Thursday, August 3, 2023*

**Fee:** \$50 per person

*Make checks payable to the "Village of Blissfield"*

**PLEASE PRINT CLEARLY**

**PLAYER NAME:** \_\_\_\_\_

**TEAM NAME:** \_\_\_\_\_

**TEAM REPRESENTATIVE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY/STATE/ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**\*\*Roster - Minimum of 9 participants per team**

**SHIRT SIZE (circle one)**

**Adult:**      Small      Medium      Large      X-Large

**Payment Information**

Total Amount of Payment: \_\_\_\_\_

Cash/Check/Credit Card payments accepted at the Village of Blissfield  
(Monday-Thursday, 9:00a-6:00p)

Mail registration and payments made payable to Village of Blissfield: 130 S. Lane St, PO Box 129  
Blissfield, MI 49228

**\*\*PLEASE SEE THE BACK OF THIS FORM TO COMPLETE LIABILITY WAIVER\*\***

Contact Information: Danielle Gross – (517) 486-4347 or administrator@blissfieldmichigan.gov

**WAIVER AND RELEASE OF LIABILITY- READ BEFORE SIGNING**

In consideration of being allowed to participate in any way in the Village of Blissfield’s sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce risk, the risk of serious injury does exist; and,
2. I accept all responsibility to inform the coach or instructor of any pertinent medical information required as part of this activity.
3. I/My child have received and reviewed the State of Michigan, Department of Health & Human Services as required by State Law.
4. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and
5. I will willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
6. I, for myself, my child, and on behalf of our heirs, assigns, personal representatives and next of kin, hereby release and hold harmless, and agree to defend and indemnify the Village of Blissfield, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (Releasees), with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the Releasees, any other entity or individual, or otherwise, to the fullest extent permitted by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date