



Adult Dodgeball League



Registration and Waiver

Team: _____ Jersey Color: _____

Liability Release Statement- I hereby release the City of Harrisonburg from all claims for damages arising from any accidents from any injuries that are caused by or arise from participation of the applicant named on this registration form during the program or in any facility or at any location where a program is being held. I grant permission to use my photo in promotional material to promote the Harrisonburg Dodgeball League.

- | | |
|-----------------|------------------|
| 1. Name: _____ | Signature: _____ |
| 2. Name: _____ | Signature: _____ |
| 3. Name: _____ | Signature: _____ |
| 4. Name: _____ | Signature: _____ |
| 5. Name: _____ | Signature: _____ |
| 6. Name: _____ | Signature: _____ |
| 7. Name: _____ | Signature: _____ |
| 8. Name: _____ | Signature: _____ |
| 9. Name: _____ | Signature: _____ |
| 10. Name: _____ | Signature: _____ |
| 11. Name: _____ | Signature: _____ |
| 12. Name: _____ | Signature: _____ |
| 13. Name: _____ | Signature: _____ |
| 14. Name: _____ | Signature: _____ |
| 15. Name: _____ | Signature: _____ |
| 16. Name: _____ | Signature: _____ |
| 17. Name: _____ | Signature: _____ |
| 18. Name: _____ | Signature: _____ |
| 19. Name: _____ | Signature: _____ |
| 20. Name: _____ | Signature: _____ |