

# RELICS 2024 REGISTRATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Phone - Cell: \_\_\_\_\_ Home: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ and Phone #: \_\_\_\_\_

Please check one box for any playing restrictions:  Play Tuesdays only;  Play Thursdays only;  
 Play games before 10:30 am only;  Play games after 10:30 am only; On Travel Team  68+  
 No restrictions and I plan on playing what % of 40+ games:  100%;  75%;  50%.

Dates I am not available (periods greater than 2 weeks) \_\_\_\_\_

Earliest Date I am available to start: \_\_\_\_\_

Position Choice: (mark first choice with 1, second choice with 2 (Position choice not guaranteed)

Pitcher\_\_\_\_ Catcher\_\_\_\_ 1<sup>st</sup> Base\_\_\_\_ 2<sup>nd</sup> Base\_\_\_\_ Short Stop\_\_\_\_ 3<sup>rd</sup> Base\_\_\_\_ Rover\_\_\_\_ Outfield\_\_\_\_

Shirt Size (unisex):  Small  Medium  Large  X-Large  XX-Large;  I would like a cap with my shirt (optional)

## AGREEMENT

I request to become a player in the Grants Pass RELICS Senior Softball Association (RELICS). I understand the RELICS is a recreational league. The RELICS has a Board of Directors, Bylaws and Playing Rules. I will comply with the decisions of the Board, the Bylaws and the Playing Rules. I will abide by the ordinances, rules and other requirements of the jurisdiction and owners of the properties where the Grants Pass RELICS Senior Softball events are held.  I agree

## REPRESENTATION

While my softball skills may be a bit rusty, I do understand the game and possess the basic skills to play the game. My health and physical condition are sufficient to play with the RELICS.  I agree

## WAIVER

By checking the box below, I understand there are risks of accidental injury when I play softball. I understand the RELICS do not carry health insurance for the players. I agree that I will hold harmless (not sue nor try to recover expenses) from the City of Grants Pass, the RELICS, any RELICS Director, any RELICS sponsor and any other player(s) involved in the accidental injury. This waiver applies to any person or entity entitled to act on my behalf.  I understand and agree

**UNSPORTSMANLIKE CONDUCT:** Unsportsmanlike conduct includes, but is not limited to, the failure to accept the decisions of the umpire or team manager, taunting or degrading an opponent or teammate, abusive or profane language, or any other demeaning language or act that could be considered unsportsmanlike. Any player engaging in unsportsmanlike conduct or failing to abide by RELICS and SSUSA rules is at risk of ejection from a game. Extreme, excessive, or repeat instances of unsportsmanlike conduct or failure to follow established rules could result in suspension and/or termination from the RELICS. All such acts will be reviewed by the RELICS Board of Directors who will render the decision to either suspend or terminate from the GP Relics.  I understand and agree

**The registration fee is \$60 if paid by March 31th, payable in cash or check. After March 31th fee is \$70.**

**YOUR REGISTRATION IS *INCOMPLETE* IF YOU DID NOT AGREE TO ALL THE ABOVE AND UNTIL PAYMENT HAS BEEN RECEIVED BY THE RELICS.**

**E-mail and Phone Number Use Policy:** The use of e-mail addresses and phone numbers, including text messaging, is limited to authorized personnel of Grants Pass RELICS Senior Softball only. Your e-mail address and phone number will never be made public by Grants Pass RELICS Senior Softball and will not be sold for commercial purposes. Receiving e-mail and text alerts is only an option and not a requirement for registration and participation in Grants Pass RELICS Senior Softball.

Print your Name

Your Signature

Date

For BOD Only – Form Accepted \_\_\_\_\_ Paid by Cash \_\_\_\_\_ OR Check \_\_\_\_\_ Date Recvd \_\_\_\_\_ Recvd By \_\_\_\_\_  
Relics 2023 Registration Form RELICS – 1630 Williams Hwy PMB 359, Grants Pass, OR 97527 website: gprelics.com