**HBBA Adult Softball**

**PLAYER ADDITION FORM**

**1. PLAYER INFORMATION (Please Print):**

**Team Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ League: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Division: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Player Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Street City Zip Code**

**Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Shirt Size: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (will be used for end of season awards only)**

**2. WAIVER SIGNATURE:**

**I am a member of the above named team and, as a participant, I will abide by all the rules, regulations and policies set forth by the Henderson Boys Baseball Association. I understand that participation in athletic activities may have an element of hazard or inherent danger, and I take full responsibility for my actions and physical condition. I hereby for myself, my heirs, executors and administrators agree to indemnify and hold Henderson Boys Baseball Association and its employees, volunteers, representatives, successors and assigns harmless from any liability, loss, cost or expense (including attorney’s fees, medical and ambulance costs) that may occur while participating. In case of emergency, I give permission for emergency medical treatment. The undersigned participant shall consider this form valid until canceled or changed in writing.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Player’s Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s Signature (for players under 18) Date**

**This form must be submitted to Henderson Boys Baseball Association or the game scorekeeper before the player will be a legal addition to the team roster.**

***Henderson Boys Baseball Association***

***P.O. BOX 1712***

***Henderson, TX 75653***

***https://www.hendersonbba.org/***