



Player Registration Form

Team Name: _____

Player Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

If the player is under 18 years old please complete the following information.

Parent/Guardians Name: _____

Address and Phone if different from above: _____

Emergency Contact: _____

Hold Harmless Release Form

I, the applicant/ we, the parents of the above applicant hereby assume all risk and hazards incidental to participation in any and all league/tournament/clinic/rental activities during the current season, including transportation to and from activities and I/we hereby waive, release, absolve, indemnify and agree to hold harmless the organizers, sponsors, supervisors, participants, corporation owners of the premises and persons transporting myself/our child to and from activities for any claim arising out of injury to myself/our child. I/we also agree to be responsible for the return of any facility owned shirts or equipment.

Individual (over 18) _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



PO Box 525, 191 Hartwell Road – Bedford, MA 01730
781-275-9700 Phone 781-275-7599 Fax
www.theedgesportscenter.com