

THIS FORM HAS TWO SIDES. FILL OUT BOTH SIDES AND SIGN THE OTHER SIDE.



Membership Application



New Member
(complete both sides)

Returning Member
(fill in name only)

Returning With Changes
(fill in name and any changes)

Name _____
Last First Initial

Address _____
Street City ZIP

Home Phone _____ Work Phone _____

Emergency Phone _____ Person to contact _____

Your date of birth _____ Spouse Name _____

eMail _____ FAX? _____

* Where did you hear about the club? _____

Check any leagues that you would like to play in:

Saturday League Tuesday League Thursday League

Fun Division - Mon/Wed AM (men 60+ and women 50+)

Position(s) you would like to play: P C 1 2 3 SS OF

Shirt size: S M L XL XXL XXXL

Cost: \$100 for one league, \$125 for 2 or 3 leagues, \$50 for Fun Division only players.
Payment from Oct 1 to Dec 31 also pays for the following year.
If your fee is not received by Jan 1, you will not be allowed to play until paid.

Optionally, you can pay dues using PayPal. Go to
<http://www.vintagesoftball.org/join-us/>

Make checks payable and mail to: Vintage Softball Club
P.O. Box 3268
Santa Clara, CA 95055-3268

Office Use Only

Application and dues \$ _____
Received by Club Officer _____ Date _____

Complete both sides of this application

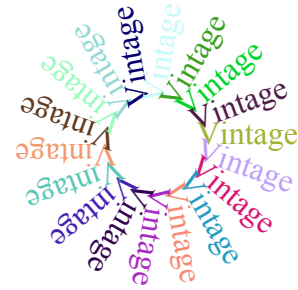
THIS FORM HAS TWO SIDES. FILL OUT BOTH SIDES AND SIGN THIS SIDE.

Vintage Softball Club of

Santa Clara County

P O Box 5945

San Jose, CA



WAIVER

The undersigned hereby applies for membership in the Vintage Softball Club of Santa Clara County, a non-profit slow pitch softball club for individuals who are or will be at least 50 years of age

In signing this WAIVER, I he

1. I agree to follow the precepts of the HANDBOOK of the Vintage Softball Club of Santa Clara County.
2. I am aware that playing softball involves risks or injury, and I understand that the Vintage Softball Club carries no medical insurance.
3. I recognize that playing softball involves strenuous physical activity including running, falling and possible physical contact, and state that I am physically fit and capable of participating in this activity.
4. I willingly assume all risks involved in my participation in softball practices and games, and agree to hold harmless the Vintage Softball Club of Santa Clara County, Inc, as well as its officers and members, for any bodily injury or death and/or damage to property including the loss of use thereof, which results or is alleged to have resulted from my participation in any Club-sponsored activity.
5. Members whose applications are received after teams are formed for specific seasons may be placed on a waiting list for team assignments, but may play as a "bucket player" until assigned.
6. It is the policy of the Vintage Softball Club to waive the annual dues if payment would be a hardship.
7. This waiver shall remain in effect for as long as I continue to play in the Vintage Softball Club or until revoked.

Please Print Name: _____

Signature _____ Date _____