

MAILING ADDRESS:

Ware Youth Softball c/o Amber Letendre
7 Walter Drive, Ware, MA 01082

New Player: Yes ☐ or No ☐

If Returning Player List Prev. Coach _____



WARE YOUTH SOFTBALL REGISTRATION FORM 2026



Player's Name: _____ Address: _____

Home Phone: _____ Cell Phone: _____ Email _____

AGE this Year as of MAY 1st _____ D.O.B. _____/_____/_____

Registrations due Tueaday March 3/31/26 – practices start mid April subject to weather/field CONDITIONS

CHECK the age group below that your player will participate in – Be advised this is a travel league.

Travel: ☐ Grade 3/4 Girls Division ☐ Grade 5/6 Girls Division ☐ Grade 7/9 Girls Division

Join us for an Introduction to Softball & Player Evaluation Clinic: Tuesday **March 31, 2026, 10am-12:00pm**, at Ware High School Gymnasium. All are welcome-no obligation to sign up. Come check it out, see if softball is a good fit for your child and have some fun! On-site registration will be available. **Bring a glove if you have one!**

The parent or guardian of the above-named child, who is a candidate for The Ware Youth Softball League, hereby gives approval for his/her participation in all the activities of Ware Softball. I/We do further release, absolve, indemnify and hold harmless Ware Youth Softball League, Town of Ware, Organizers, Sponsors, any or all of them, in case of injury to my participant. I/ We waive to the extent not covered by liability insurance and claim against any person dealing with Ware Youth Softball or the Town of Ware, Massachusetts. I/We will furnish a birth certificate of the above-named child upon request of Ware Softball officials.

Any registration form received after the last sign-up date of **3/31/26** is subject to a **\$20.00 late registration fee.**

PARENT/GUARDIAN NAME (Printed): _____

PARENT/GURADIAN NAME (Signature or Typed): _____ **Date:** _____

Please list any **allergies**, **conditions**, and **disabilities** that may affect your participant's ability to fully participate in Ware Softball.

Head or Asst Coach Interest – List Name (CORI background check is required): _____

REGISTRATION FEES:

Rec. Travel League: Any division is **\$100.00** - **Preferred Registration and Payment Method is Online at townofware.com.** Go to the Parks & Rec page, bottom left side, hover over Ware Baseball/Softball and a drop-down will appear, select baseball/softball registration Online payment center.

Please make checks payable to **"Town of Ware"** to mailing address 7 Walter Drive., Ware, MA 01082 c/o Amber Letendre – Financial Aid available (incremental payment program) – **This NOT a Ware Public Schools sponsored event**

Payment Date: _____ **Amount Paid:** _____ **Check #** _____ **Cash** _____ **Received By:** _____

WARE PARK & RECREATION VOLUNTARY WAIVER AND RELEASE FORM

In consideration of the opportunity for my minor child to participate in the Town of Ware's voluntary or recreation program (hereinafter "athletic/recreation programs"). I, _____, the undersigned parent or legal guardian of _____, a minor, do hereby consent to my child's participation in the athletic/recreation programs of the Town of Ware and for myself and on behalf of my minor child, do **hereby and forever release, acquit, discharge, waive, hold harmless, agree not to sue and indemnify**, the Town of Ware, the Park and Recreation Commission and all the employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic/recreation programs of the Town of Ware and on behalf of the Town of Ware and/or the Parks and Recreation Commission (hereinafter "the Releasees"), liabilities of every kind and nature, including but not limited to injury or property damage, whether known or unknown, in law or equity, which I or my minor child ever had, now have, or may have, directly or indirectly, arising from or in any way related to my child's participation in the Town of Ware voluntary athletic/recreation programs.

I understand, recognize and acknowledge that participation in the Town of Ware voluntary athletic/recreation programs are potentially hazardous. I further understand that notwithstanding precautions taken by the Releasees, participation in these voluntary athletic/recreation programs involves a potential risk of injury or other damage. I am voluntarily allowing my child to participate in these activities with knowledge of the potential risks (including injury or other damages) that is involved. I hereby agree to expressly assume and accept any and all risks associated with my child's participation in the voluntary athletic/recreation programs of the Town of Ware. I affirm that I have read this Waiver and Release form and that I understand the contents of this Form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this form, I affirm that I have decided to allow my child to participate in Town of Ware athletic or recreation programs with full knowledge that the Releasees will not be liable to me, my child, or anyone for personal injuries, property damage or other loss that my child or I may suffer as a result of my child's participation in the voluntary Town of Ware athletic/recreation programs.

I have read the above Waiver and Release and I understand that I, for myself and on behalf of my child, are giving up substantial rights by signing this document and I certify that I, for myself and on behalf of my child, have signed this document voluntarily.

Name of Parent or Guardian

Signature (Typed) of Parent or Guardian Signing Above

Printed Name of Minor Child

Date

[illegible]

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