

TEAM REGISTRATION & ROSTER



MUST COMPLETE, SIGN & TURN IN BOTH PAGES (Team Registration & Team Roster) - NO CARRY INS ALLOWED
CONVENIENTLY LOCATED 1 MILE NORTH OF HWY 41 - ON HWY JJ - BETWEEN BALLARD RD & HWY N
W3035 Edgewood Trail • Appleton, WI 54913 • 920-731-7529 - www.pcfoxcities.com

Please print using blue or black ink. One form per Team.

Program Name _____ Program Date _____

Coach/Captain Name _____ Team Name _____ # of Team Members _____

Address _____ City _____ State _____ Zip _____

Phone (home) _____ (work) _____ (cell) _____

E-mail _____

PAYMENT TYPE (Mark below payment type) WE DO NOT ACCEPT CREDIT OR DEBIT CARDS - \$40 NSF Fee will be charged for returned checks

Cash Check # _____ Amount of Payment \$ _____

Amount of Payment

\$

Please circle other Sports of interest: BASEBALL BASKETBALL FLAG FOOTBALL
SOCCER SOFTBALL VOLLEYBALL WHIFFLEBALL DODGEBALL KICKBALL
GOLF TRACK & FIELD BIRTHDAY PARTY TEAM PARTY

Captains or team representative must sign registration that they understand and will relay this information to members of their team regarding payments, rosters, waivers and conduct.

CAPTAIN SIGNATURE _____

FEES

- Teams need to pay a deposit of 50% for league - 100% for tournaments, one week prior to their start dates.
- Individual fees will be paid in full upon date of registration.
- Balance of registration fee MUST be paid in full before the second game. Failure to do so will result in a forfeit and your team will not be allowed to participate that evening.
- All players paying the individual fee will be assigned to teams by Players Choice of the Fox Cities, LLC. Considerations will be made for special circumstances (if we are notified in advance) such as: siblings, carpooling, player positions, etc.

SCHEDULES

- Schedules will be posted on Players Choice of the Fox Cities, LLC website prior to the first weeks game
- Once schedule is produced, no refunds will be granted
- All scheduling requests must be made in writing or emailed one week prior to the leagues beginning. All requests will be taken into account but are not guaranteed.
- Once the schedule has been issued and is on our website Players Choice of the Fox Cities, LLC can not change or alter this under any circumstances. If for an unseen reason you are not allowed to play your game, it will be considered a forfeit and no make up games will be allowed.
- If you are unable to play a game please contact Players Choice of the Fox Cities, LLC at least 48 hours prior

ROSTERS/WAIVER

- A complete roster must be filled out; it may be printed off from Players Choice of the Fox Cities, LLC website or can be picked up at the front counter. Rosters must be submitted to Players Choice of the Fox Cities, LLC prior to the first game. You may add and delete from the roster until your third league game (rosters from tournaments may not be changed from original). After that, the roster is frozen. Please take into account injuries and obligations by your team members.
- A waiver form MUST be filled out by all participants and be on file. This form will only need to be filled out once, as it will be stored on file, and can be used for any activity at Players Choice of the Fox Cities, LLC Failure to have a waiver on file can result in an athlete having to sit out of an event.

FORFEITING/BEHAVIOR

- A player must have played in one regular season game to be able to play once playoffs/championship rounds have started
- Fighting or disruptive behavior will result in immediate and potentially permanent suspension from the facility
- Any teams habitually forfeiting games due to lack of players or no-shows may be removed from league schedule at Players Choice of the Fox Cities, LLC discretion with no refund.

TEAM ROSTER MUST BE FILLED OUT COMPLETELY, SIGNED AND SUBMITTED PRIOR TO THE START OF EACH SESSION.
ANY ADDITIONS OR SUBSTITUTIONS MUST BE CLEARED BY THE LEAGUE DIRECTOR PRIOR TO PLAY.

Team Roster/Waiver must be SIGNED by each participant. Children 17 & under need Parent or Legal Guardian signature.

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT

In consideration of being permitted to participate in any way in the activities ("Activity") I, for myself for personal representatives, assigns, heirs, and next of kin and/or I/ THE MINOR'S PARENT AND/OR LEGAL GUARDIAN ACKNOWLEDGE, agree, and represent that I understand the nature of Activities and that I/The minor am/is qualified, in good health, and in proper physical condition to participate in such Activity. I/The minor further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. FULLY UNDERSTAND THAT: ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inaction's, the actions or inaction's of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISK AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I/The minor incur as a result of my participation or that of the minor in the Activity. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE Players Choice of the Fox Cities, LLC, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owner and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim. I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT. Also, I waive(s) all rights to any photos taken for use in any Players Choice of the Fox Cities, LLC publication.

Participant's Signature (only if age 18 or over) or Parent/Legal Gardian: _____ Date: _____

1. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____
2. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____
3. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____
4. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____
5. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____
6. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____
7. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____
8. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____

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9. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____

10. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____

11. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____

12. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____

13. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____

14. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____

15. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____

16. Name (Captain) _____ D.O.B. _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Phone _____
Parents Name _____ Signature _____