



# Northwest Independent Baseball League

## 18+ and 28+ Adult Wood Bat Summer, Fall League and Free Agent Registration

3425 SE Raymond St, Portland, Oregon 97202 \* NWIBL Office (503) 208-2009 \*

Email: [Baseball@nwibl.org](mailto:Baseball@nwibl.org) , Website: /www.nwibl.org

### PLAYER REGISTRATION FORM

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Phone #'s \_\_\_\_\_

Email: \_\_\_\_\_ Position(s) Played \_\_\_\_\_

#### Did you Play:

High School Baseball: \_\_\_ College Baseball \_\_\_ Professional Baseball \_\_\_ (level) Last year played competitive baseball \_\_\_\_\_

#### RULES AND CONDITIONS

By signing or affixing name to this form or by participating or agreeing to participate in any league event all players, coaches and managers agree to abide by all league rules and conditions, all rulings, decrees, and determination of the league commissioner, and all league policies regarding personal conduct in relation to all league events. Any violation of league rules, conditions, or policies may be subject to fine, suspension or expulsion to be imposed at the discretion of the league Director.

#### RELEASE OF LIABILITY AND CONSENT

**THE UNDERSIGNED** ("Participant") is over the age of 18 and wishes to participate in Northwest Independent Baseball League, a non-professional adult baseball league. Participant has been advised that Northwest Independent Baseball League does not carry insurance for any injuries that the participant may receive or incur while participating in Northwest Independent Baseball League and participant must make their own arrangements for insurance. I residing at the listed address, execute this Release and Consent with the express intention of extinguishing any claims as hereby set forth.

#### STIPULATIONS

Whereas Northwest Independent Baseball League is conducting a program of a supervised athletic event, and whereas, I desire to participate in said program, in consideration of the above representations, I, for myself and my heirs, legal representatives and assigns, release and discharge Northwest Independent Baseball League, its officers, directors, and employees, from liability or causes of action for personal injury or any other losses as a result of my participation in any Northwest Independent Baseball League event, I have read the Release and Consent and understand all of its terms and conditions. I have executed voluntarily and with full knowledge of its legal significance.

PLAYER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Mailing Address if different than above \_\_\_\_\_ City, State, Zip \_\_\_\_\_

*\*NWIBL GLADLY ACCEPTS MAJOR CREDIT CARDS FOR PAYMENT OF YOUR PLAYER FEE\**

VISA / MCA Credit Card Number \_\_\_\_\_ Expires \_\_\_\_\_

Cardholder name as it appears on card \_\_\_\_\_

I agree to pay the total amount of \$ \_\_\_\_\_ according to card issuer agreement.

Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_

**Free Agent Player Fees: Injury Insurance one time \$15.00 in force until May 1, 2011 and a Per Game fee \$20.00 for both league game Sub and Monday Night Baseball**

**Player fee Season Summer \$370.00 Fall \$185 (NO REFUNDS)** To pay by MasterCard or VISA complete and sign above. To pay by check or money order, please make payable to NWIBL. Mail completed, signed application with complete payment, **NO PARTIAL PAYMENTS PLEASE**, to 3425 SE Raymond St, Portland, Oregon 97202. or fax to 818-474-7273