

**CO-ED Softball
Registration Form**
(Visit us at www.lybsa.net)

Please Print:

Team Name: _____

Coaches Name: _____

Phone #: _____

Cell #: _____

Town: _____

Release of Liability

The above mentioned participant does hereby agree to release and forever discharge Lawson Baseball/Softball Association, its officers, directors, agents, members, and employees from all action, damages, claims, or demands, which we, our heirs, executors, and administrators may have against Lawson Baseball/Softball Association for all personal injuries and property damage which may occur by participating in the above mentioned activity.

Signature

Date