



Biddy Ball

Winter/Spring 2019

Name: _____

Age: _____

Parent(s)'s Name: _____

Address: _____

City/State/Zip: _____

Day Telephone: (_____) _____

Evening Telephone: (_____) _____

Mobile Phone: (_____) _____

Email: _____

Registration is also available online at www.brewstersportscenter.com

Fee: \$200/session \$375 for both sessions

Winter: _____ **Spring:** _____ **Both:** _____

Please send your completed form with check payable to **Brewster Sports Management**. All fees are non-refundable.

Send To: Brewster Sports Center
19 Sutton Place
Brewster, NY 10509

ALL PAYMENTS ARE NONREFUNDABLE. \$25 bounced check fees. All players are responsible for their own insurance.
Disclaimer: I hereby authorize the staff of the "Brewster Sports Center" to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release "Brewster Sports Center" from any and all liability for any injuries or illnesses incurred while participating at the facility or property. I have no knowledge of any physical impairment that would affect the player's participation, named to the above, in the league or tournament as outlined in the information. I also understand that "Brewster Sports Center" has the right to use, for publicity and advertising purposes, photographs of participants taken at the facility. I understand and accept the tournament/league fees and refund policies.

Parent or Guardian Signature: _____ Date: _____