



East Coast Rainbow Softball Association
PO Box 36006 Spring Garden Road, Halifax, NS B3J 3S9
ECRSAINFO@gmail.com www.ecrsa.ca

2018 REGISTRATION FORM

East Coast Rainbow Softball Association is a recreational co-ed slo-pitch softball league for the 2SLGBTQ+ Community and their allies. Anyone over the age of 19 of any fitness level is welcome.

Registration Type and Fees:

Fulltime Player - \$60.00 Spare - \$5.00 / game (payable at each game)
Cheques and Money Orders are to be made payable to East Coast Rainbow Softball Association
eTransfers can be sent to ecrsaregistration@yahoo.com with a password of "softball"
I am paying by Cash Money Order Cheque eTransfer

Contact Information:

Last Name:	First Name:	Middle (optional):
Email:		Phone:
Address:		Postal Code:
Age as of May 1, 2018:	Do you have current First Aid Qualifications: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Emergency Information:

Name:	Phone:	Relation:
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Player Information:

Rate your abilities on a 1-5 scale (circle one): 1 2 3 4 5	Years Played:
Jersey Size (* if available): <input type="checkbox"/> X-Small* <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> 2X-Large <input type="checkbox"/> 3X-Large*	

Player Preference: (Preferences are not guaranteed)

First Choice Position:	Second Choice Position:
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Self-Identification:

Our organization strives for inclusion across the basis of sexual orientation, gender identity and expression. In order to represent the 2SLGBTQ+ community with effectiveness and in effort to have teams made up of majority community members, please consider the following optional question:

Do you consider yourself a member of the 2SLGBTQ+ community?

Yes No No, but I identify as an Ally Prefer not to say

Liability Waiver and Fee Payment Policy

Risks: I acknowledge that participation in the sport of softball as conducted within the rules and regulations may involve inherent risks which may cause any degree of serious injury to its participants. I fully understand the risks and dangers associated with my participation in the sport of softball as conducted in accordance with its rules and regulations and do accept them entirely at my own risk. I understand if I am injured an ECRSA commission member, team captain or umpire may make the decision to call 911.

Discrimination Policy: I acknowledge I am required to use inclusive, non-discriminatory language and behave in a respectful manner at all times, before, during and after each game or ECRSA event. Violations of this policy may result in game(s) suspension or removal from ECRSA.

Fees: I acknowledge that ECRSA registration fees are non-refundable.

Rules: I am responsible to have read and follow the League Rules at all times.

Uniforms: Sponsors pay for jerseys. I understand I am expected to support our sponsor(s) by wearing my jersey during league play and other ECRSA events.

Communication: ECRSA communicates with members by Email and Social Media. I consent to receiving email updates from ECRSA with league, game play, or sponsor information. I am responsible to stay updated on ECRSA related information by going to the website, FB page or talking with my team captain.

Declaration: The above information is true to the best of my knowledge. My signature indicates I have read, understand and agree to the terms of this waiver and the above items.

Signature:	Date:
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