



# REGISTRATION FORM

**4 Games Guaranteed!  
August 24-25, 2019**

**Tournament Deadline:  
Monday, August 19, 2019**

Registration form along with Payment, must be turned in to Granger City Hall, 102 Main Street, Granger, Monday through Friday from 9 a.m. to 5 p.m. by Monday, August 19, 2019.

For Tournament Information, please contact Timmy Lemos at 509-643-1776.

Team Name: \_\_\_\_\_

**Please Circle for Team: MALE / FEMALE**

**ENTRY FEES:**

K - 8th Grade - \$100

Men 6' and Under - \$120

High School 9th - 12th Grade - \$120

Women's Division - \$120

City of Granger Indemnification Agreement: I specifically and expressly agree to defend, indemnify, and hold harmless the City of Granger and all its officers, officials, employees, and agents from and against any claim, damage, liability, cost, penalties, attorney fees, etc. of whatsoever kind on account of death or injury of any or all persons involved and/or on account of all property damage of any kind whether tangible, intangible, or loss of use resulting therefrom, to any party arising from or in any matter connected with the EVENT taking place on publicly owned property, by an act or omission or negligence of the City of Granger, or any of its officers, officials, employees, or agents except to the extent prohibited by law.

I specifically and expressly waive any immunity granted under the Washington Industrial Insurance Act, Title 51, RCW, or similar laws or other jurisdictions, and by signature above, acknowledge that this waiver was mutually negotiated and agreed to by these parties. In the event of litigation between the parties to enforce the rights under this indemnity provision, reasonable attorney's fees shall be allowed to the prevailing party.

**Coach Contact Information (Must be an adult)**

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**TEAM CAPTAIN PLAYER #1**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ School Grade next fall (1-12) \_\_\_\_\_

**Signatures: (Please read "City of Granger Indemnification agreement")**

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

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLAYER #2**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ School Grade next fall (1-12) \_\_\_\_\_

***Signatures: (Please read "City of Granger Indemnification agreement")***

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

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLAYER #3**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ School Grade next fall (1-12) \_\_\_\_\_

***Signatures: (Please read "City of Granger Indemnification agreement")***

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

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLAYER #4**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ School Grade next fall (1-12) \_\_\_\_\_

***Signatures: (Please read "City of Granger Indemnification agreement")***

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

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

Date Received: \_\_\_\_\_ By: \_\_\_\_\_

Fee: \_\_\_\_\_ Cash \_\_\_\_ Check/Money Order # \_\_\_\_\_ Receipt # \_\_\_\_\_