2024 Homer's Heroes Registration **Registrations are Due by May 16, 2024**

Child's Name:					Age as of June 1, 2024:				
Bir	rth Date:		M F						
	I	Players	must be 5 – 17	years of	age as of June 1, 2	2024.			
Ple	ase indicate your	player's	shirt size belo	w:					
	Youth 6-8 Youth 10-12		Youth 14-16 Adult Small		Adult Medium Adult Large		Adult XL Adult XXL		
F	Parent/Guardian N	lame:							
	Add	dress:							
	City, State	e Zip:							
Phone: Home			Other						
E-ı	mail address for a	nnounce	ements:						
Please describe what type of assistance your player will need. wheelchair \Box walker \Box									
Signature of Parent/Guardian Date							ate		
do	cument and assum	ne the ris	sks which are in	ncidental t	tand the contents of our child participuse pictures of ou	oating i	in the Homer's		
П	Yes, I want to help by being a "buddy" during the games.								



Mail to: Homer's Heroes Baseball c/o Dottie Williams 2300 Atwood Circle Lincoln NE 68521



Registration Consent & Release League Copy

I / We, the undersigned

The parent(s) or Legal Guardian(s) recognizes the coaches and support personnel are volunteers and may not have received training in their activities or other functions in the Homer's Heroes Baseball League. The Parent(s) or Legal Guardian(s) recognizes baseball may result in serious injuries and protective equipment does not prevent all injuries to players.

Except as to those coverage's provided in the supplemental insurance policy of the Homer's Heroes Baseball League. The undersigned, for themselves and for the Participant, hereby release, absolve, agree to indemnify and hold harmless the Homer's Heroes Baseball League, it's officers, coaches, support persons, and all other persons transporting Participant to and from the Homer's Heroes Baseball League activities, from any and all liability arising from injury which the Participant experiences while participating in or traveling to and from a Homer's Heroes Baseball League Activity.

As to the coverage provided in the supplemental insurance policy of the Homer's Heroes Baseball League and the health and accident insurance provided a Participant by Homer's Heroes Baseball League, the undersigned for themselves and for the Participant, hereby release, absolve, agree to indemnify and hold harmless Homer's Heroes Baseball League, it's officers, coaches, support persons and all other persons furthering the efforts of the Homer's Heroes Baseball League from any and all liability for any amount in excess of policy limits recovers (including deductibles as well as maximum payment amounts) on such insurance policies.

I give consent to Homer's Heroes Baseball League to take photographs of my participation in Homer's Heroes. I further consent to use such photographs to promote Homer's Heroes Baseball. I understand that I will receive no financial or compensation for the use of such photographs.