



HARRIS COUNTY SENIOR SOFTBALL LEAGUE
Registration for 2024-2025 Winter Season (November - March)

Registration form fields: Last Name, First Name, Emergency contact name and number, Street Address, City, State, Zip, Home Phone, Work/Cell Phone, Date of Birth, Occupation (former occupation, if retired), and eMail Address (PLEASE PRINT LEGIBLY).

DUTIES: You have a responsibility to assist the LEAGUE in one of the duties noted below. Please mark your choice:

- Manager, Grass Mowing, Infield Dragging, Pre Game Field Setup (checkboxes)

ALL PLAYERS

- 1. If you decline to play in the division (and on the nights) in which you are drafted, your registration fee will not be refunded.
2. The deadline for the receipt of HCSSL registrations is October 19, 2024.
3. Registration and fees must be received by the deadline above, even if mailed (postmarked by the above is not sufficient) or it will be late.

RETURNING PLAYERS

- 1. Players who have not played in the 2024 HCSSL Summer Season or previous Winter Season (2023-2024) are required to attend the evaluation session on Saturday, October 12th from 9:00 to 11:00 A.M. at Bayland Park Senior Softball Field # 2.
2. Any player signing up after October 19th will become a pickup player and will not be permanently assigned to a team until Jan. 1, 2025.
3. There is no guarantee you will play in the division in which you last played.

NEW PLAYERS

- 1. All new players, both day and night league, must participate in an evaluation session on Saturday, October 12th from 9:00 to 11:00 A.M. on Bayland Field #2.
2. The HCSSL Weather Line at (713)788-1824 will have any schedule changes due to weather. Prior to the evaluations, you will be required to show proof of age (driver's license).
3. Please indicate which defensive positions you prefer to play on the reverse side of this registration form.

I (print name) _____ agree to indemnify and hold harmless Harris County, the Harris County Senior Softball League (HCSSL), its Officers and Directors, from any liability, INCLUDING BUT NOT LIMITED TO ANY NEGLIGENT ACT OR OMISSION of HCSSL, its Officers, Directors or designated representatives, arising from the use of HCSSL fields or facilities, including but not limited to an injury or death resulting from my participation in any HCSSL sanctioned activities or other approved activities or events.

Signed: _____ Date: _____

Membership Fees (Non-refundable)

- Night League \$80.00
Day League \$30.00
Associates \$15.00 Payable Annually

Make your check payable to HCSSL, and mail to HCSSL P. O. Box 1024, Bellaire, TX 77402-1024
Check the Registration Info tab on our website (WWW.HCSSL.ORG) to confirm receipt of your application