



Buncombe County Recreation Services



Adult League Kickball Application

YOU MUST BE AT LEAST 18 YEARS OLD TO PARTICIPATE

*A Separate Application must be completed by each team member

NAME _____

EMAIL _____

PHONE: _____ EMERGENCY # _____

ADDRESS: _____

INSURANCE _____

MEDICAL/OTHER INFORMATION: _____

*Application will not be accepted if all information is not complete.

I understand and agree that the registration fee is non-refundable.

I understand that Buncombe County Recreation Services (hereinafter "BCRS") reserves the right to cancel any game that does not begin at its scheduled time for any reason. I give permission to BCRS staff to seek medical attention and authorize medical attention necessary in the case of an accident, injury, or illness. I will be responsible for all costs or medical attention and treatment.

I further covenant and agree for myself, my heirs, executors/administrators, successors and assigns to hold Buncombe county, BCRS and its staff, officers, agents, employees, representatives, and successors and assigns harmless from any and all damages, claims or demand of all person, firms and corporations from any personal injury or damage to property that I might suffer arising out of or in connection with my use of Buncombe County and BCRS facilities and premises which may be sustained or occur or be connected, in any way, with my participation in any Buncombe County Recreation Department Leagues.

\$260.00 Per Team Fee – Includes: T-Shirts (10), Kick balls & Field Usage
OR

\$40.00 Per Play Fee – Includes: T-Shirt, Kick balls and Field Usage

SHIRT SIZE (*Circle One*) **XS S M L XL XXL 3-XL 4-XL**

I have read and understand the rules.

Signature _____ **Date** _____

Make Checks Payable to: Buncombe County Recreation Services

For Additional Information Contact Jay Nelson (828)250-4269 jay.nelson@buncombecounty.org