



Player Registration and Waiver Form

INSTRUCTIONS: All fields are required. To register for the 2026 Meridian Del Drake Senior Wood Bat Softball League. Return the filled-out registration form with your player fees to the Meridian Parks and Recreation Office by:

Tuesday, March 10th, 2026 by 5 p.m., call after deadline to see if still space. Paperwork and payment must be received by the deadline and still have available spots open.

League Fees: Includes about 20 league games (Starts the week of April 13th - end of September) and Championship games playoff in September on a Saturday, and a league team uniform shirt.

Player Fees: \$75 *After deadline, please call office about space in the leagues and pricing.*

Monday Night @ Bear Creek ☐

Tuesday Morning @ Settlers ☐

Thursday Morning @ Settlers ☐

First and Last Name: _____

Phone: _____

Home Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

#1 Position: P ___ C ___ 1B ___ 2B ___ SS ___ 3B ___ RF ___ RCF ___ CF ___ LCF ___ LF ___ OF ___ IF ___

#2 Position: P ___ C ___ 1B ___ 2B ___ SS ___ 3B ___ RF ___ RCF ___ CF ___ LCF ___ LF ___ OF ___ IF ___

#3 Position: P ___ C ___ 1B ___ 2B ___ SS ___ 3B ___ RF ___ RCF ___ CF ___ LCF ___ LF ___ OF ___ IF ___

Emergency Contact Name and Phone: _____

Special Requests: people you would like to play with or not, or vacations: _____

Date of Birth: _____

Shirt Size: Medium ___ Large ___ XL ___ 2XL ___ 3XL ___

I would like to manage a team: Yes ___ No ___

Would you be interested in joining a *new* Fall league? (2 games a wk - T/Th mornings for 5 weeks end of Sept-Oct): Yes ___ No ___

WAIVER AGREEMENT: I acknowledge that my participation in the above-written activity offered by the City of Meridian presents risks, some of which are unknown. I agree to assume all known and unknown risks associated with my participation. I hereby release and forever discharge the City, its agents and employees from all real or possible claims for damages or other harm to person or property not attributable to the tortious conduct of City's agents and employees, regardless of the manner by which such claim may be brought. I consent to and authorize first aid, emergency medical care, and/or hospitalization for treatment of injuries or illness that I sustain while or as a result of participating in this activity. I understand that I am solely responsible for any and all expenses that are incurred as a result of any injury or illness incurred while or as a result of participating in this activity. I acknowledge that the activity may be canceled with or without notice to me, due to unforeseen conditions beyond the control of the City. I consent to the publication and/or use of any photographs or recordings of me by the City for promotional purposes. I understand that my approval of this agreement means that I cannot later bring a claim against the City, its agents, and/or its employees. I have read, I understand, and I will comply with this agreement and all applicable rules, policies, and laws.

Signature: _____

Ways to Register: First complete the current registration form. Once, paperwork is completed follow the below steps to complete and secure your spot in the league.

Online - Register and pay online via the [online registration system](#).

In-Person - Bring your completed form to our office at: 33 E. Broadway Ave., Suite 206. Pay with card, check, or cash.

Mail-In - Send your completed form and payment to 33 E. Broadway Ave., Suite 206, Meridian, ID 83642 (Must arrive before the deadline and while spots are available.)

Payment Method (Office Use Only)

Check #: _____ Cash: _____ Credit Card: _____ In Person, Phone, Online, or Mail: _____

Date paid: _____ Amount Paid: _____ City Receipt Number: _____ Received By: _____