

Player Waiver, Release of Liability, and Information Agreement Roster.

CLEARWATER PARKS & RECREATION DEPARTMENT SOFTBALL TEAM ROSTER

Mon	Tue	Wed	Thu	Sr.	Rec.	Minor	Maj.	Coed
Season: _____				Year: _____				

PLEASE PRINT AND COMPLETE THE LOWER SECTION IN FULL

Team Name: _____

Manager: _____

Address: _____ Phone: _____

City _____ Zip Code: _____

Fax: _____ E-mail: _____

Asst. Manager: _____

Address: _____ Phone: _____

City _____ Zip Code: _____

MANAGER'S

SIGNATURE: _____

I have read and agree to the Player Waiver, Release of Liability, and Information Agreement Roster.

TO ALL PLAYERS/MANAGERS/COACHES/ & SPONSORS:

By signing this roster, I agree to the following information and statements as it pertains to the *City of Clearwater PARKS & RECREATION DEPARTMENT ADULT ATHLETIC LEAGUE* I am participating in:

I, the undersigned player, acknowledge, agree, and understand that:

1. Voluntarily and of my own free will, I elect to participate as a member of the softball team and City of Clearwater Adult Softball League.
2. I understand that there are certain risks and hazards involved in participating in softball that may result in injury or death to me or other players including, but not limited to those hazards associated with weather conditions, playing conditions, equipment, and other participants.
3. I understand that sliding into base is dangerous to me and to other players and may result in serious injury or death.
4. I understand that the very nature of the game of softball is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding, and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. Further, I, the undersigned player, agree that in consideration for the right to play as a member of team designated below and in consideration for permission to play on the fields arranged for by the team or league:
 1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and all of the fields arranged for by my team or league for practice or play.
 2. I release, discharge and agree not to sue the team and league designated below, the field owner or other entity designated below, the City of Clearwater, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or City of Clearwater for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released from any claims, damages, injuries or death are caused in whole or in part by any of the parties or entities hereby released, I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISINS IN THIS WAIVER, RELASED OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGERE TO ABIDE BY THEM.

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