2024 Lynn's Softball Waiver

Waiver, Release of Liability and Assumption of the Risks of playing in Lynn's Softball League.

Disclaimer: Lynn's Softball League is not responsible for any injury, including death, or loss of property to any person suffered while on any field participating in the Lynn's Softball League.

In consideration of my participation in Lynn's Softball League, I hereby release and covenant not to sue Lynn's Softball, its owners, employees, and representatives from any and all present and future claims resulting from ordinary negligence and inherent risk of use of fields.

I am fully aware, appreciate, and understand that the activities offered by Lynn's Softball(Adult Recreational Softball games) and associated activities such as spectating, socializing, eating, and drinking can, may and do involve severe cardiovascular stress, violent physical contact; the risk of serious injury including permanent disability and death, severe social and economic losses, and other unknown or unforeseeable risks.

I am fully aware and understand that Lynn's Softball League does not have on or about any fields/premises, or employ or contract with any medical services, provisions for ordinary or emergency medical services.

I am fully aware and understand that such losses, injury, disability, or death may result from the actions, interactions or negligence on my part of Lynn's Softball League, on the part of others, the rules of play, or the condition of Lynn's Softball League and field equipment.

I agree that immediately prior to participating in any activity occurring in or about Lynn's Softball League's fields and equipment to be used and if any defect is apparent in any field or equipment and I will notify the management of Lynn's Softball League of the defect.

I assume all the foregoing risks and accept personal responsibility for any damages and loss following any loss of property, injury, permanent disability or death resulting therefrom.

I have read and fully understand the above waiver, release and assumption of risk and fully understand that I have given up substantial rights by signing this waiver, release and assumption of risk and sign it voluntarily.

Date	Name(Print)	Signature		
Address		City,State	Zip Code	
Phone #				