

**Player Waiver, Release of liability and Indemnification Agreement**

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 athletic team and league indicated below.
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 the team designated below and in consideration for permission to play on the fields arranged for by the team or league:
5. 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.
6. I release, discharge and agree not to sue the team and league designated below, the City of Greenville field owner or other entity designated below, the United States Specialty Sports Association, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or United States Specialty Sports Association for any claim, damages, costs or cause of action which I have or may in the future have as 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

**In the event the Greenville Parks & Recreation staff does a random bat check and finds a bat to show signs of alterations. The player/ person claiming the bat will have the following choices:**

1. The owner/ or person claiming the bat will turn the bat over to The City of Greenville Parks & Recreation Staff to be destroyed or used as a training tool for our staff and umpires, and will be continued to allow to participate.
2. The owner/ person claiming the bat will have the option to have us send the bat in for testing, during which time the player will be suspended pending the test results which could take up to 6 months. At which time if it is found to be altered then you will be suspended for a time period of two years from league play and all USSSA events.
3. The owner/ person claiming the bat that doesn't want to turn the bat over, will then be suspended from league play and all USSSA events immediately for one calendar year from the date.

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Name of Team

Name of League

Signature of Human Resource  
(Industrial), Church Pastor (Church),  
Club Representative (Club)

**I acknowledge that I have read and that I understand each and every one of the above provisions in this waiver, release of liability and Indemnification agreement and agree to abide by them.**

	NAME OF PERSON (PRINT)	SIGNATURE OF PLAYER	DATE
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**Greenville Parks and Recreation Department  
Adult Team Official Roster Form**

Season: \_\_\_\_\_ League: \_\_\_\_\_

Team Name: \_\_\_\_\_

Manager's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Coaches' email: \_\_\_\_\_

	Player Name	Telephone Number
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\*\*Industrial, Church & Club teams must have signature of official representative on Player Waiver form\*\*