## Englewood Men's Senior Softball League LIABILITY RELEASE FORM

## PLEASE PRINT CLEARLY IN INK

| board member at one of the open pra | Ibmitted electronically, deliver it to a team manager or league actice sessions. Electronic submission of a PDF of the d be emailed to: ESSLRegister@hotmail.com |
|-------------------------------------|--|
| TODAY'S DATE:                       | YEAR BORN:   |
| NAME:                               |  |
|                                     |  |
|                                     | []Landline []Cell  |
| eMAIL:                              |  |

[] I do not have an email address

**INDEMNIFCATION STATEMENT:** (Note: A prospective player must sign and date this form in order to participate in league activities.)

The undersigned participant, in consideration for the Englewood Senior Softball League, Inc and for the County of Sarasota through its Department of Parks and Recreation providing facilities, instruction and supervision in softball competition does hereby:

- 1. Assume all risk of possible damage, injury or illness (including from communicable diseases), sustained or acquired through participation in the above activity.
- 2. Request permission to participate in the activity with full knowledge that said activity could result in damage, injury (including serious injury)or illness to me.
- 3. Agree to comply with the stated and customary terms, conditions and league rules for participation.
- 4. Affirm, that upon observation of any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
- 5. Agrees to indemnify and hold harmless the League & County and/or its department, agents, officers and directors, employees, other participants, and sponsors from liability resulting from my participation in said activity.

Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

## THE ENGLEWOOD SENIOR SOFTBALL LEAGUE STRONGLY RECOMMENDS THAT ANY PARTICIPANT PLAYING THE INFIELD WEAR A PROTECTIVE MASK TO PROTECT AGAINST INJURY. IF YOU CHOOSE NOT TO DO SO, YOU DO SO AT YOUR OWN RISK.

Following execution and presentation of this document and a completed Player Registration form to league officials, the above named Player will be issued a league membership number. This number must be provided to the participant's team manager for recording on the official team roster, if drafted or assigned to a team. Players listed on the roster without an accompanying, verified membership number may not be allowed to play until such time as the number is provided.