Ketchikan Softball Association

Official Player Contract

| Season: | | _ | | |
|---------------|-------|------|-----------------------|------|
| League: | Men's | CoEd | | |
| | | | <u>(Please Print)</u> | |
| Team Name: | | | | |
| Former Team | : | | | |
| Player's Nam | e: | | | |
| Mailing Addro | ess: | | | |
| Phone: | | | | NO |
| | | | | |

As indicated by my signature below, I agree to play softball with the above named team, during the indicated season. I also agree to comply with all the rules and regulations as stated in the Ketchikan Softball Association Constitution and Bylaws, and the respective League Rules.

NO METAL CLEATS ARE ALLOWED

I understand that I will be participating in the Ketchikan Softball Association as a player, at my own risk and have signed the player waiver (On reverse side of this form), release of liability and indemnification agreement that each coach has for his/her team.

I agree to pay a **<u>\$50 Player Membership Fee</u>** to the Ketchikan Softball Association upon signing this agreement, as a condition to participate in the Association.

 Player's Signature ______ Date: ______

 Manager's Signature ______ Date: ______

Note: A released player MUST sign a new contract with the new team and turn it in to KSA office prior to playing with a new team. This is a one-time membership fee, and is non-refundable and non-transferable.

| FOR OFFICE USE ONLY: | | | | |
|------------------------------|------------------------|--|--|--|
| Payment Received: Check Cash | | | | |
| Receipt Number: | | | | |
| Date: | _ Payment Received by: | | | |

Ketchikan Softball Association 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 Softball 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, 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 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 of 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 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 ball players on my Team and (C) while on or upon the premise 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 owners or other entity designated below, the Amateur Softball Association of America, or their owners, officers, agents, servants, associations, employees or any other person or entity connected with the Team, League, Field or Amateur Softball Association of America for any claim, damages, cost 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 thereby released.

Name of Team: _____

Name of League: Ketchikan Softball Association Field Owner: Ketchikan Gateway Borough

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 Player (Please Print): ______

Signature: Date: