

# Kiwanis Co-Ed Softball

831-673-0318

Office Use Only

League Director

Approval \_\_\_\_\_

initials

Date \_\_\_\_\_

## ADD PLAYER FORM

A player must sign this add player form and have it approved by the league director prior to participating. The add player form must be on file with the league director before the player is allowed to participate. NOTE: Any falsification of information on this form will subject the player and manager to suspension and/or removal from the league.

PLAYER NAME \_\_\_\_\_

TEAM NAME \_\_\_\_\_ DIVISION \_\_\_\_\_

PLAYER ADDRESS \_\_\_\_\_

- Proof of residency is required by the Kiwanis Co-Ed Softball League

CITY| \_\_\_\_\_ ZIP CODE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

TELEPHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_

E-MAIL: \_\_\_\_\_ SPORT: \_\_\_\_\_ EXP: \_\_\_\_\_

\_\_\_\_\_  
Player's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager's Signature

\_\_\_\_\_  
Date

### MANAGER'S RELEASE

**Do not sign here unless you are releasing the player from your official roster.**

Manager's Signature \_\_\_\_\_

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

### RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

I, the undersigned participant, acknowledge, agree, and understand that: Voluntarily and of my own free will, I elect to participate as a member of the program indicated ABOVE. 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 playing conditions, equipment, and other participants. Further, I, the undersigned participant, agree that in consideration for the right to play as a member of the program designated below and in consideration for permission to play on the facility arranged for by the coordinator or team:

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 facilities arranged for by my team or league for practice or play.

I, the undersigned, do hereby agree to allow said individual to participate in the aforementioned activity, and in consideration for participating in this activity, and to the maximum extent authorized by law, I agree to hold harmless, and release the Hollister Kiwanis, its agents, and employees, from any and all liability for any injury, howsoever caused, which may be suffered by the undersigned, arising out of or in any way connected with participation in this activity. I HAVE READ THE ABOVE APPLICATION AND AGREEMENT AND FULLY UNDERSTAND THAT I ASSUME ALL RISKS FOR ANY INJURIES RECEIVED.

DATE: \_\_\_\_\_

PARTICIPANT SIGNATURE: \_\_\_\_\_