

# PLAYER ADDITION FORM

This form MUST be filled out COMPLETELY, INITIALED, SIGNED AND DATED.

**FAX TO JOHN GRONDONA: 1-619-342-2627**

MGR'S NAME: \_\_\_\_\_ PH HME: \_\_\_\_\_ PH WRK: \_\_\_\_\_

Please Circle all that Apply:

Type of League: Co-Ed 3-pitch Co-ed Slo-pitch Men's Slo-pitch Women's 3-pitch

Location of League: HOURGLASS CANYONSIDE MIRA MESA REC.

Day Of League: M T W TH F SUN Division: (if applicable) A B C D E

**PLAYER INFORMATION PLEASE FILL IN COMPLETELY, PRINT LEGIBLY:**

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT/Suite: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

AGE: \_\_\_\_\_ HOME PHONE ( ) \_\_\_\_\_, BUSINESS PHONE: ( ) \_\_\_\_\_, EXT. \_\_\_\_\_

1. I, the undersigned, am aware that the **ACTIVITY OF SOFTBALL OR VOLLEYBALL INVOLVES NUMEROUS RISKS OF INJURY, INCLUDING DEATH, AND I FREELY ASSUME THOSE RISKS.** [INITIAL]: \_\_\_\_\_
2. I am voluntarily choosing to participate in the City of San Diego Park and Recreation Department adult softball or volleyball program and related events and activities. As lawful consideration for permission to participate in the adult softball or volleyball program and related events and activities, and for permission to use Park and Recreation Department facilities, **I AGREE TO RELEASE FROM ANY LEGAL LIABILITY AND AGREE NOT TO SUE THE CITY OF SAN DIEGO,** its officers, agents, and employees, and the Amateur Softball Association, its agents, officers, officials, and umpires, for any and all injuries, including death, or property damage caused by or resulting from my participation in the adult softball or volleyball program and related events and activities whether or not such injury, death, or property damage was caused by alleged negligence.
3. I agree that this AGREEMENT AND RELEASE OF LIABILITY is intended to be as broad and inclusive as is permitted by law. Any provision found to be invalid or unenforceable by a court shall not affect the validity or enforceability of any other provision.
4. I agree to inspect the facilities and equipment to be used and accept them "as is," or, if I believe any facility or piece of equipment to be unsafe, I will immediately advise my manager, supervisor, or other person in charge of the activity of the unsafe condition and refuse to participate in the activity.
5. I am aware of the rules and policies of this adult softball or volleyball league. I am aware that violation of the rules or policies could result in my suspension from the league. I am playing in an amateur league and agree that I shall accept no direct or indirect remuneration for playing in the league.
6. I AM AWARE THAT THIS CONTRACT IS LEGALLY BINDING AND THAT I AM RELEASING LEGAL RIGHTS BY SIGNING IT. I AM VOLUNTARILY SIGNING THIS AGREEMENT AND IT IS INTENDED TO BE BINDING ON MY HEIRS, PERSONAL REPRESENTATIVES, NEXT OF KIN, AND ASSIGNS.

\_\_\_\_\_  
PLAYER SIGNATURE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DATE

**PLEASE MAKE SURE YOU HAVE INITIALED #1 (above) AND SIGNED AND DATED AT THE BOTTOM**