



PLAYER AGREEMENT

I, _____, hereby agree to play amateur baseball during the 2020

Print

Baseball Season for the _____, a team in the North County Men’s Adult Baseball League (NC/MSBL65+) **Team**

I understand that NC/MSBL LLC is affiliated with North County Men’s Baseball League Inc. and Men’s Senior Baseball League, Inc. I agree to participate in accordance with the policies, rules, and regulations of NC/MSBL LLC, and I agree to have my actions as a participant reviewed by the Board, Commissioner, or League President and I agree to be subject to fines and penalties, including suspension from participation in the activities of NC/MSBL LLC. I understand I must be at least 65 years of age to participate in the NCMSBL65+.

OBLIGATION TO PAY DUES AND FEES

As a condition of participation I agree to pay league fees of _____ dollars to join NC/MSBL LLC, as a member and participant for the season. I understand that this fee covers my membership and my share of field use expense, cost of baseballs, and liability insurance.

PHOTO RELEASE

I hereby grant NC/MSBL LLC, North County Men’s Baseball League Inc., Men’s Senior Baseball League, Inc., and *Hardball Magazine* permission to publish in *Hardball Magazine*, or use for publicity purposes in any other publication, brochure, and websites any photographs taken of me during my participation in the activities of NC/MSBL LLC, North County Men’s Baseball League Inc. and Men’s Senior Baseball League Inc.

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY

I acknowledge and fully understand that participation in baseball activities involves risks and dangers of serious bodily injury, including permanent disability, paralysis and death. I fully accept and assume all such risks whether or not known to me or foreseeable, and accept and assume full responsibility for losses, costs, and damages that I may incur as a result of my participation in the NCMSBL LLC activities.

Warranty of Player Fitness

I hereby warrant to the North County Men’s Senior Baseball League that I (player) have been cleared medically and have no impairment or ailment to prevent me from engaging in the activities of the NCMSBL.

I do hereby release, discharge, covenant not to sue, and agree to indemnify and hold harmless, on behalf of myself, my heirs, successors, and assigns, North County Men’s Baseball League, Inc., North County Men’s Senior Baseball League LLC, North County Men’s Adult Baseball League, Men’s Senior Baseball League, Inc. and all its affiliates, and their respective teams, administrators, officers, owners, directors, agents, and employees, other participants, any sponsors, and owners and leasers of premises (all of which are "Releases") on which the baseball activity takes place, from all liability, claims, losses or damages from all causes caused or alleged to be caused by the acts of the “Releases” or otherwise, including negligent rescue operations.

Signed: _____

CELL PHONE: _____

Date of Birth: _____

HOME PHONE: _____

Date Signed: _____

Address: _____

Driver’s License#: _____

City/Zip: _____

Occupation: _____

E-mail Address: _____