



2025 MIDLAND SOFTBALL ASSOCIATION – MIDLAND PARKS AND RECREATION TEAM ROSTER
PLAYERS CONTRACT AND RELEASE OF LIABILITY WAIVER – Page 1 of 2



PLEASE PRINT

Team Name: _____ Division of Play _____ Manager Name: _____ Gender: M / F

(MSP, Church, Coed, Womens, MMP, etc.)

Manager Address: _____ Zip Code: _____ Cell/Phone #: _____ Email: _____

TEAM PLAYERS;

EACH OF US, THE UNDERSIGNED PLAYERS on the Team Roster, HEREBY ACKNOWLEDGE, AGREE AND UNDERSTAND THAT:

1. I am 18 years old or older. If not, I will have a parent or guardian sign this roster and a concussion awareness form stating I have permission to play and understand the rules and regulations.
2. Playing softball is hazardous to myself and other players. I will play at my own risk. Sliding is dangerous to myself and other players. I will slide at my own risk.
3. Other aspects of softball are dangerous and may result in injury. I will follow all rules as provided and I will observe all fences, barriers and obstructions prior to the game.
4. I will not fake tag players; I will not crash into other players; I will not throw my bat and/or equipment or conduct myself in a hazardous manner.
5. I am aware and understand that copies of the Rules and Regulations were furnished to this team's manager at the start of the season and I understand and agree that it is my responsibility to read, understand and abide by these rules.

FURTHER, IN CONDERATION FOR THE RIGHT TO PLAY LEAGUE SOFTBALL WITH THE ABOVE ORGANIZATIONS, I AGREE BY SIGNING THE ROSTER THAT:

I, the undersigned player or the parent or legal guardian of a minor player named below, 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 including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants in addition to the acts of pitching, throwing, fielding and catching of 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 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 field arranged for by the team or league: 1.) I voluntarily elect or accept and solely assume all risk of damages, injury, including death, 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 or observer during practice of play by other teams or by other 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/or league designated below or any owner or leasee of fields on which softball is played or practiced by my team or the Amateur Softball Association of America, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or the Amateur Softball Association of America for any claim, damages, costs 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 hereby released. I further agree that I shall hold harmless and fully indemnify the parties hereby released from any claims, damages, costs including attorney fees, and cause of action which may arise from any claim or cause of action made by me, through me or on my behalf even if the damages, injuries or death are caused in whole or in part by any of the parties or entities hereby released. 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. I give permission for MSA and City of Midland to use in any and all publications (including media), pictures or video taken during league or tournament play.

I, the undersigned Manager, understand that it is MY responsibility to inform my players of the Player Code of Conduct and all other Rules and Regulations of the Midland Softball Association and Midland Parks and Recreation. Any subsequent violations of these rules may result in suspension and/or expulsion of myself, the individual player, or the entire team.

Manager Signature: _____ Date: _____



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PLAYERS CONTRACT AND RELEASE OF LIABILITY WAIVER – Page 2 of 2



PLEASE PRINT

Team Name: _____ **Division of Play** _____ **Manager Name:** _____

I, the undersigned player, acknowledge that I have read the terms of this contract, understand them and agree to abide by them.

OFFICE USE ONLY	OFFICE USE ONLY		PLAYER NAME	SHIRT SIZE	STREET, CITY	ZIP	PHONE	EMAIL	BIRTHDATE	SIGNATURE
DATE	AMT									
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		3								
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