



RELEASE, INDEMNITY & TERMS FOR CHAMPIONSHIP ROSTER

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I, the signed player or the parent or legal guardian of a minor player named on this roster, 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 as well as the risk of communicable diseases, all of which can cause serious injury or death to me and to other players. Further, I agree that in consideration for 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 or 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 USA Softball, their owners, officers, umpires, agents, servants, associations, employees, or any person or entity connected with the team, league, field or USA Softball 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 these 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 AND BELOW PROVISIONS IN THIS RELEASE, INDEMNITY & TERMS AND AGREE TO ABIDE BY THEM.

LIKENESS AUTHORIZATION: By signing the roster form, and in consideration of being permitted to participate, I the undersigned player, or, I, the parent or legal guardian of a minor player named on the roster, hereby grant USA Softball Inc., its local associations, its sponsors, its affiliates, and each of their licensees, sponsors and business partners, the irrevocable, non-exclusive, transferable, sublicensable, and assignable right to depict, without any additional consideration and in perpetuity, in any and all media now or hereafter known, the player's proprietary rights, including, without limitation, likeness, image, name, words, voice, and/or biographical information (collectively, "Images") in the advertising for or publicizing of USA Softball Inc., its local associations, its sponsors, its affiliates or any USA Softball event or other event, now or hereinafter, and I further permit USA Softball to use any tweets, posts, or other content of the event created by the Player. In addition, in connection with the use of the Images, I hereby release and waive any action or cause of action that Player may assert in connection with the use of the Images, including, but not limited to, any claims which the Player has or may have for invasion of privacy, defamation, violation of any right of publicity, or any other cause of action arising out of the production, reproduction, distribution, transmission, publication, public performance, broadcast, or exhibition of advertisements, promotions, content, programs, and/or materials in which the Images appear. By signing the roster form, I certify that I have read this statement and that information supplied on this form is correct to the best of my knowledge. I accept this Likeness Authorization on behalf of myself and (if applicable) any child under 18 years old for whom I am parent/guardian. **PLAYER CERTIFICATION:**

EACH PLAYER SHOULD READ THE FOLLOWING STATEMENT BEFORE COMPLETING AND SIGNING THE FOLLOWING PAGE. I have received USA Softball's Official Rules of Softball and I understand and agree to be bound by the rules of USA Softball. I am a member in good standing of this softball team and I am eligible to compete with this team in the Championship Play of USA Softball. I understand that I may play on only one team within a division during the season in USA Softball Championship Play and this is the team which I have elected to play for this season. I understand and agree that USA Softball has the right to take permanent possession of a bat that has been determined to be altered. In consideration of my being permitted to compete. I hereby subscribe my name in the column for signatures and by doing so certify that I have read this statement and that information supplied on this roster is correct to the best of my knowledge.

PARENT/GUARDIAN CERTIFICATION:

IF PLAYER IS A MINOR, HIS OR HER PARENT OR LEGAL GUARDIAN MUST SIGN ROSTER ON FOLLOWING PAGE. NOTE: FOR JUNIOR OLYMPIC DIVISIONS, VERIFICATIONS OF BIRTH DATE FOR EACH PLAYER MUST BE ATTACHED (i.e., Birth Certificate, Baptismal Certificate or Hospital Certificate may be used.) Legible photo copies will be accepted. I HEREBY GIVE PERMISSION TO THE TEAM MANAGER, INDICATED BELOW, TO OBTAIN MEDICAL TREATMENT FOR THE MINOR PLAYERS WHICH I AM EITHER PARENT OR LEGAL GUARDIAN, IN THE EVENT THAT I AM NOT AVAILABLE AND MEDICAL TREATMENT IS REQUIRED. On behalf of the minor player, I hereby incorporate by reference and agree to comply with the policies and terms stated herein, including, on behalf of the minor player, the likeness authorization, the release, and other terms. I hereby subscribe my name in the column for signatures and by doing so certify that I have read this statement and that information supplied on this roster is correct to the best of my knowledge.

TEAM MANAGER CERTIFICATION:

I am the manager of the above mentioned team and after receiving USA Softball's Official Rules of Softball, and after being duly sworn, depose and say that all the information supplied above is correct to the best of my knowledge and that all the players signed the above in their handwriting and they are eligible to compete with my team in the Championship Play of USA Softball and agree to be bound by the rules of USA Softball as contained in the USA Softball Code and USA Softball's Official Rules of Softball.

<input type="text"/>	<input type="text"/>	<input type="text"/>
MANAGER NAME	DATE	MANAGER SIGNATURE
<input type="text"/>	<input type="text"/>	<input type="text"/>
ADDRESS	CITY/STATE/ZIP CODE	
<input type="text"/>	<input type="text"/>	<input type="text"/>
PHONE	EMAIL	

USA SOFTBALL COMMISSIONER STATEMENT:

All of the information on this roster is correct to the best of my knowledge.

<input type="text"/>	<input type="text"/>	<input type="text"/>
COMMISSIONER OR DESIGNEE NAME	DATE	SIGNATURE
<input type="text"/>	<input type="text"/>	<input type="text"/>
PHONE	EMAIL	
<input type="text"/>	<input type="text"/>	<input type="text"/>
USA SOFTBALL REGION NUMBER	USA SOFTBALL LOCAL ASSOCIATION	
<input type="text"/>	<input type="text"/>	<input type="text"/>
DEPUTY/DISTRICT COMMISSIONER NAME	SIGNATURE	