



Team Roster/Player Contract TOP GUN SENIOR SOFTBALL ASSOCIATION

1. Waiver and Release of Liability (injury to myself or to my personal property)

In consideration of acceptance of this entry I, for myself, my heirs, successors, and assigns, waive any and all claims and hold harmless Top Gun Senior Softball Association, its Board of Directors, City and County, their agents or employees, Tournament Directors, Umpires and Tournament sponsors, from and against any and all loss liability, charges and expenses (including attorney fees) and causes of action of whatsoever character which may arise by travel to and from, and participation in any Top Gun Senior Softball event from October 1, 2020 – September 30, 2021.

By signing below I expressly agree that this waiver and release is intended to be as broad and inclusive as permitted by law and that if any portion of this waiver and release is held to be invalid by a court or other trier of fact, the remainder shall continue in full legal force and effect.

2. Hold harmless (injury to others or to other property)

I will indemnify and hold harmless Top Gun Senior Softball Association, its Board of Directors, Tournament Organizers, Umpires and Sponsors from any loss or liability (bodily injuries, illness, or death, and/or for damage to property, including the loss of use thereof) which results or is alleged to have resulted from my participation in this event.

3. Player responsibility for procuring Insurance

I am fully aware that Top Gun Senior Softball Association carry no medical insurance for any participants and that I am solely responsible for securing my own insurance, and that my team is responsible for securing its own insurance.

4. Manager Familiarity with rules

My manager has informed me that he has read the current Official Senior Softball Guide and Playing Rules and has advised me of the contents thereof.

5. Assumption of Risk

I am fully aware of the inherent risks and hazards in connection with my participation in any Top Gun Senior Softball Association game or tournament, including injury, illness, disability, and death. I understand this risk includes the exposure to or contraction of communicable diseases, including, but not limited to COVID-19. I VOLUNTARILY ASSUME THE RISK OF ANY INJURIES OR ILLNESS, REGARDLESS OF THE SEVERITY, AND INCLUDING DEATH that I may incur to myself and all risk of damage to or loss of property which may occur as a result of my participation. I understand that this assumption of risk includes, without limitation, risks associated with (1) maintenance of condition of the playing field, (2) the condition of accessories thereto (backstops, fences,

irrigation facilities, bases, mounds, bat racks, bleachers and dugouts) and (3) all equipment supplied by the Parks and Recreation Department of the City, County, or Tournament Organizers or Sponsors. I recognize that I am solely responsible for my decisions to participate in any game in this Top Gun Senior Softball Association Tournament/Game or event.

6. Softball Skills

I am familiar with the skills required to participate in this Tournament, Game or Event presented by Top Gun Senior Softball Association (including batting, running, and throwing) and have satisfied myself that I am proficient in these skills.

7. Health

I am in good health and have no physical conditions that would prevent me from participating in Top Gun Senior Softball Association Tournaments, Game, or events.

I have read and understood all the provisions contained in this Team Roster/Player Contract. I understand that I have given up substantial rights by signing it and I sign it freely and voluntarily.

BY AFFIXING MY SIGNATURE TO THIS DOCUMENT, I UNDERSTAND AND AGREE TO ALL THE ABOVE.

TEAM NAME			MANAGER NAME		
TOURNAMENT DATE			TOURNAMENT LOCATION		
	PRINTED NAME	SIGNATURE		PRINTED NAME	SIGNATURE
1			12		
2			13		
3			14		
4			15		
5			16		
6			17		
7			18		
8			19		
9			20		
10			21		
11			22		