

CITY OF SANTA CRUZ PARKS AND RECREATION DEPARTMENT

SPRING SOFTBALL LEAGUE 2019



323 CHURCH STREET, SANTA CRUZ, CA (831) 420-5270, FAX:(831) 420-5271

TEAM NAME: _____ MEN'S WOMEN'S CO-REC
 MANAGER: _____ HM. PHONE: _____ CL. PHONE: _____
 ADDRESS: _____
 CITY: _____ ZIP: _____

Note: All information must be clearly legible, accurate, and verifiable. **Players: Complete both sides**

PLAYER NAME (print)	STREET ADDRESS*(No PO Box)	CITY	ZIP	HOME PHONE	Office Use NR Fee? \$20 or ✓
01. _____	_____	_____	_____	_____	_____
02. _____	_____	_____	_____	_____	_____
03. _____	_____	_____	_____	_____	_____
04. _____	_____	_____	_____	_____	_____
05. _____	_____	_____	_____	_____	_____
06. _____	_____	_____	_____	_____	_____
07. _____	_____	_____	_____	_____	_____
08. _____	_____	_____	_____	_____	_____
09. _____	_____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____	_____
11. _____	_____	_____	_____	_____	_____
12. _____	_____	_____	_____	_____	_____
13. _____	_____	_____	_____	_____	_____
14. _____	_____	_____	_____	_____	_____
15. _____	_____	_____	_____	_____	_____
16. _____	_____	_____	_____	_____	_____
17. _____	_____	_____	_____	_____	_____
18. _____	_____	_____	_____	_____	_____
19. _____	_____	_____	_____	_____	_____
20. _____	_____	_____	_____	_____	_____

**Current Proof of residency required; copy of driver's license, utility bill or bank account deposit slip.
 City boundaries are approximately Natural Bridges State Beach to the Santa Cruz Yacht Harbor.*

All information provided on the front and back of this form is valid and verifiable. **Complete both sides.**

MANAGER'S SIGNATURE: _____ DATE: _____

Office Use Only:

Previous league: _____ Priority: _____ League fee: \$ _____
 Previous season/record: _____ Non-res fee: \$20 x _____: \$ _____
 Note: _____ Total due at registration: \$ _____

Cash Register validation:

SOFTBALL - Player Waiver, Release of Liability and Indemnification Agreement

I, the undersigned player, acknowledge, agree and understand that:

1. Voluntarily and of my own free will, I elect to participate as a member of the softball team indicated below and in consideration for the City of Santa Cruz's agreement to allow my participation I voluntarily elect to accept and abide by City Parks and Rec softball league rules and the SANCRA Code of Conduct. I further agree to abide by and obey all laws while I am on City property in connection with my participation and acknowledge that my failure to obey the rules, code of conduct or laws will be cause for the City, without further warning and without refund of fees, to forfeit one or more of my team's games or to expel me or my entire team from the league.
2. I understand that there are certain risks and hazards involved in participating in softball that may result in injury or death to me or other players, including but not limited to, those hazards associated with weather conditions, playing conditions, sliding into base, equipment and other participants.
3. I understand that the very nature of the game of softball is hazardous and risky, including, but not limited 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.
4. I voluntarily elect to accept and assume all risks of injury 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 during practice or play by other teams or by other players on my team, and (c) upon the premises of any and all of the venues arranged for by my team or league for practice or play. In consideration of participation on this team, I on behalf of myself, hereby agree to release, hold harmless, indemnify and defend the City of Santa Cruz, its agents, employees, and volunteers from any and all claims or liability (including attorneys' fees and defense costs) for bodily injury or property damage arising from my negligence or willful misconduct relating to my participation in the above program. My duty to release, hold harmless, indemnify and defend the City of Santa Cruz shall not apply only when (1) the injury to person or property arises wholly from the negligence or willful misconduct of the City or its agents or employees or volunteers and (2) I have contributed in no part to the bodily injury or property damage. I hereby give the City of Santa Cruz Parks and Recreation Department the right to use photographs taken of me while participating in the above activity for reproduction in any medium for purposes of advertising, trade, display, exhibition, or editorial use.

 Name of Team

City of Santa Cruz _____
 Field Owner of Other Entity

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.

NAME (print)	SIGNATURE	DATE	EMAIL ADDRESS
01.			
02.			
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All information provided on the front and back of this form is valid and verifiable.

MANAGER'S SIGNATURE: _____ **DATE:** _____