

Adult Softball Add Form

In consideration of participating in the San Luis Obispo Parks and Recreation Department's Adult Softball League, I hereby waive, release and discharge any and all claims for damage which I may have, or which may hereafter accrue to me, as a result of my participation in said program. This release is intended to discharge in advance the City of San Luis Obispo, the San Luis Obispo Softball Players' Association, the Parks and Recreation Commission, Southern California Municipal Athletic Federation, Amateur Softball Association, and any other involved public entities, (and respective agents and employees), from and against any and all liability arising out of or connected in any way with my participation in said program, even though that liability may arise out of negligence and carelessness on the part of the persons or entities mentioned above.

I further understand that serious accidents occasionally occur during softball games and that participants in said sport occasionally sustain serious personal injuries, and/or property damage, as a consequence thereof. Knowing the risks of softball; nevertheless, I hereby agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who, (through negligence or carelessness), might otherwise be liable to me, (or my heirs or assigns), for damages.

It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

I agree to accept and abide by the rules and regulations of the San Luis Obispo Parks and Recreation Department, Southern California Municipal Athletic Federation and Amateur Softball Association.

A \$5.00 fee must be paid upon presentation of this add form to the Parks and Recreation Department.

A \$8.00 non-resident fee must be paid by any participant not residing within the city limits of San Luis Obispo, fees are due upon presentation of this add form to the Parks and Recreation Department.

Team Name: _____

Player's Name: _____

Player's Signature: _____ Date: _____

Residential Address: _____

City, State, Zip: _____ Phone: _____

OFFICE USE ONLY

Add Number: _____ Date Added: _____

Non-resident fee paid: _____ Received by: _____