



Summer Roster: RocSoftball @ Cobb's Hill

Team Name: _____ Night of Play: _____

League (*circle one*): Men's – COED – Women's

ALL fields BELOW are REQUIRED; Additional Manager signature REQUIRED on Page 2!

	<i>Name (Print)</i>	<i>Signature</i>	<i>Date</i>	<i>Cell #</i>	<i>Email</i>
1.					
2.					
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20.					

By signature of this roster form you are consenting to the waiver agreements on page 2 thru 4

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

1. All Covid-19 CDC restrictions that apply at the current Phase regarding baseball
2. Voluntarily and of my own free will, I elect to participate as a member of the softball team indicated below and the RocSoftball @ *Cobb's Hill* League.
3. 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, equipment and other participants.
4. I understand that sliding into base is dangerous to me and to other players and may result in serious injury or death.
5. 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.
6. **I understand that while every effort will be made to play all scheduled games during a given season, there may be scenarios where that is not possible. I also understand that in these rare instances no refunds will be issued for any league fees.**

Further, I, the undersigned player, 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 fields arranged for by the team or the City of Rochester, New York and its RocSoftball @ *Cobb's Hill* Softball League.

1. 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) while on or upon the premises of any and all of the fields arranged for by my team or the City of Rochester, New York and its RocSoftball @ *Cobb's Hill* League for practice or play, (c) I have fully read and understand the **USSSA Return to Play Waiver** and assume all risks associated with returning to play.
2. I release, discharge and agree not to sue the team, the City of Rochester, New York, the RocSoftball @ *Cobb's Hill* League, its employees, its agents, consultants, or the entity designated below, USSSA or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, the RocSoftball @ *Cobb's Hill* League the City of Rochester or USSSA for any claim, damages, costs or cause of action which I have or may in the future have as a result of health, 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.
3. I further verify that my team manager or assistant manager has given me a copy of the rules and regulations of the RocSoftball @ *Cobb's Hill* League.

_____	<u>RocSoftball @ <i>Cobb's Hill</i> League</u>	<u>City of Rochester, NY</u>
Name of Team	Name of League	Field Owner or Other Entity

_____	_____	_____
Manager's Name (printed)	Manager's Address/Zip Code	Manager's Signature

I understand, as Manager, that it is essential that the signatures of the players on the roster are valid and are not forged. I further agree that only players with valid signatures will participate in league or playoff games.

My signature above verifies:

- (1) All signatures of players on the roster were signed in my presence and are their valid signatures.
- (2) A copy of the rules and regulations of the RocSoftball @ *Cobb's Hill* League were given to each player listed on the 2021 Player, Waiver, Release of Liability and Indemnification Agreement.
- (3) A copy of the **USSSA Return to Play waiver** has given to each player listed on the 2021 Player, Waiver, Release of Liability and Indemnification Agreement.

****MANAGER - PLEASE REMEMBER TO SIGN YOUR NAME IN THE PROPER SPACE ABOVE.**



RETURN TO PLAY WAIVER

In consideration of being allowed to participate in any way in the UNITED STATES SPECIALTY SPORTS ASSOCIATION athletics/sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury and/or illness from the activities involved in the program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist;
2. The risk to have contact with individuals, who have been exposed to and/or have been diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions, diseases, or maladies does exist, and it is impossible to eliminate the risk that I could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease;
3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume all full responsibility for my participation;
4. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE UNITED STATES SPECIALTY SPORTS ASSOCIATION, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of the premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
6. **I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, BEFORE ACKNOWLEDGING THE CHECKBOX BELOW, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY AGREEING TO IT ON MY OWN BEHALF OR ON BEHALF OF THE YOUTH PARTICIPANT ASSOCIATED WITH THIS GUARDIAN ACCOUNT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

May 8, 2020



ACKNOWLEDGEMENT BY ADULT PARTICIPANT: By acknowledging and agreeing to the checkbox below, I agree and verify the following: 1) I consent and agree to assume the risks of participation in these programs; and 2) that I specifically agree to the release as provided herein of all the Releasees, and, for myself, my heirs, assigns and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my involvement or participation in these programs EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

ACKNOWLEDGMENT BY PARENTS AND/OR LEGAL GUARDIANS OF YOUTH PARTICIPANTS: By acknowledging and agreeing to the check box below, I agree to and verify the following: 1) I am the parent or legal guardian for the youth participant associated with this guardian account, 2) that the date of birth of the youth participant associated with this guardian account is correct, 3) that as parent/legal guardian with legal responsibility for this youth participant, I consent and agree to assume the risks of his/her participation in these programs; and 4) that I specifically agree to his/her release as provided herein of all the Releasees, and, for myself, my heirs, assigns and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to this youth participant's involvement or participation in these programs as provided above EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.