

SANDY PARKS AND RECREATION

2021 CLEAN & SOBER ADULT SOFTBALL TEAM ROSTER/GENERAL RELEASE OF LIABILITY

TEAM NAME _____ **COACH'S NAME** _____ **PHONE C)** _____ **DIVISION:** _____

I represent that I am 18 years or older, and that I have read, understood and that I agree to the following terms as a condition of my participation in this program:

1. **Release of Liability.** I recognize that participation in this recreational activity involves the risk of bodily, emotional and other injury to myself and others and the risk of acquiring an illness or communicable disease (including but not limited to Covid-19) and infecting others. I also understand my vehicle may sustain property damage if struck by a softball. In consideration of being permitted to participate in this program and its activities, I hereby assume the risks identified above and release, waive, discharge and covenant not to sue Sandy City, and the umpiring association team and league sponsors and each entities officers, officials, employees, agents and volunteers from damage and against any claim, or injury, illness or disease by me or on my behalf arising from my participation in this program and its activities.
2. **Insurance.** I understand that I should have adequate vehicle, health and accident insurance to cover injuries, illness, disease and damage arising from my participation in this program, and that the City provides no insurance or other coverage for such injuries, illness, disease or property damage I sustain. I assume full responsibility for all such property damage, medical costs and expenses arising from my participation in this program and its activities.
3. **Safety.** I agree that players and teams have an obligation to inspect the playing fields for unsafe conditions before and during play, and I agree to immediately inform the teams, coaches, players at the field, officials, staff and Sandy Parks and Recreation Department of these conditions.
4. **Breadth.** I agree that this agreement, including the release and waiver terms, is intended to be as broad and as inclusive as permitted by the laws of the State of Utah, and that if any portion of this is determined to be invalid, the remaining terms shall continue in full force and effect.
5. **Eligibility.** I understand the CSSA eligibility rules and I agree to abide by these rules in order to participate in this league.

1.	PLAYER'S NAME (PRINT CLEARLY)	PLAYER'S SIGNATURE	DATE	PHONE #	LEAGUE ELIGIBILITY STATUS			Sobriety date			
					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>		Family	<input type="checkbox"/>	Staff
2.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
3.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
4.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
5.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
6.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
7.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
8.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
9.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
10.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
11.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
12.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
13.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
14.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
15.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
16.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
17.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
18.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
19.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	
20.					<input type="checkbox"/>	In Recovery	<input type="checkbox"/>	Family	<input type="checkbox"/>	Staff	