

## TEAM WAIVER AND RELEASE OF LIABILITY

As conditions for participating in the Sioux Falls Church Softball League and related activities, each of the undersigned members of \_\_\_\_\_ team:

1. Agrees that prior to participating, he/she will inspect the facilities and equipment to be used, and immediately advise a League Officer or Division Commissioner of unsafe conditions and refuse to participate until corrected.
2. Acknowledges and fully understands the risk of serious injury, including permanent disability and death, and severe social and economic losses which may result from his/her own actions or actions, inactions or negligence of others. And that there may be other risks not known to us or foreseeable at this time.
3. Assumes all the foregoing risks and accepts personal responsibility for the damages following injury, permanent disability or death incurred in connection with participation in Sioux falls Church Softball League Games.
4. Agree not to sue the Sioux Falls Church Softball League or its officers/members or allow his/her heirs and next of kin to sue for damages or losses related to said activities.

**I certify that the team members have personally signed this waiver and release.**

**Coach or Manager's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTANDING THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BU VOLUNTARILY SIGNING THIS FORM. **(All team members must sign)**

|     | Name  | Address | Signature |
|-----|-------|---------|-----------|
| 1.  | _____ | _____   | _____     |
| 2.  | _____ | _____   | _____     |
| 3.  | _____ | _____   | _____     |
| 4.  | _____ | _____   | _____     |
| 5.  | _____ | _____   | _____     |
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| 8.  | _____ | _____   | _____     |
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| 20. | _____ | _____   | _____     |

