



# Softball • Volleyball Player Contract

601 W. 36th Ave., Suite #2 • Anchorage, AK 99503 • (907) 272-4200 • FAX (907) 272-4207  
Email: atsa@gci.net • www.anchortownsports.com

Name (Print): \_\_\_\_\_

Team Name: \_\_\_\_\_ League \_\_\_\_\_

Player Address: \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone (hm) \_\_\_\_\_ (wk) \_\_\_\_\_ (cell) \_\_\_\_\_

E-mail (optional) \_\_\_\_\_

In addition to the Anchor Town Player Fee, I would like to donate to the Anchor Town Scholarship Foundation in the amount of (circle one):     \$1     \$5     \$10     Other: \_\_\_\_\_

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 sports team and league indicated above.
2. I understand that there are certain risks and hazards involved in participating in sports 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.
3. I understand that sliding into bases is dangerous to me and to other players and may result in serious injury or death.
4. I understand that the very nature of the games of softball, baseball and volleyball 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, and 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. Further, I, the undersigned player, agree that in consideration for the right to play as a member of the team designated above and in consideration for permission to play on the fields or courts arranged for by the team or league:
  - A. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (1) while practicing or playing as a member of the team so designated, (2) 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 (3) while on or upon the premises of any and all of the fields arranged for by my team or league for practice or play.
  - B. I release, discharge and agree not to sue the team and league designated above, the field owner or other entity designated below, the Amateur Softball Association, or their owners, officers, agents, servants, associates, employees, or any person or entity connected with the team, league, field or Amateur Softball Association for any claim, damages, costs or cause of action which I have or may in the future have as a result of 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.

Player Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Team Manager Signature: \_\_\_\_\_

Requested jersey # \_\_\_\_\_

Jersey size \_\_\_\_\_

*"Anchor Town does not provide Jerseys"*

ATSA Agent: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Receipt No. \_\_\_\_\_