\$20



JSA PLAYER AGREEMENT & WAIVER OF LIABILITY

\$20

Players: I agree to play for this team in accordance with the regulations of the Juneau Sports Association. In signing this agreement, I certify that I am eligible under the current divisional regulations. I agree to pay a player fee upon signing this agreement as a condition to participate.

Non-Players: In order to comply with local insurance requirements, non-players are required to pay a fee and sign a Waiver of Liability in order to be on the field, whether it be to coach, base coach, collect bats, or any other reason. Non-players must abide by all rules set forth by the Juneau Sports Association and/or ASA. I agree to pay a non-player fee upon signing this agreement as a condition to participate.

This fee is NON-REFUNDABLE NOR TRANSFERABLE TO ANOTHER PERSON.

INHERENT RISKS OF SOFTBALL: I understand softball is a game played within a confined space in an outdoor environment that requires skill and ability to run, catch, throw, and hit a ball. Since the ball is both thrown and hit at a high rate of speed, being hit with a ball and/or bat is an obvious threat. Anyone playing softball should be aware of these inherent risks and the fact that a ball can cause severe bruising, broken skin, bones, and teeth. A blow to the head can cause a concussion and/or cranial fracture which can lead to a fatal injury as well as less severe injuries. A ball or bat striking the eye can cause irreparable damage or result in a total loss of vision. Because players are playing in a confined area, misjudgment of distance may result in a collision with a fence or other players. Since players are known to slide and/or fall on a dirt surface, which may contain rocks, injuries to the body, bones, tendons, ligaments, and muscles may occur. Collision between two or more ju players may cause bodily injury including concussion, cranial fracture, broken bones or teeth, eye injuries, cuts, bruises, and skin abrasions.

CATASTROPHIC INJURIES RELATED TO THE INHERENT RISKS OF SOFTBALL INCLUDE BUT ARE NOT LIMITED TO: 1) Loss of vision as a result of collision with another person, bat, ball and/or fence; 2) Fatal and/or brain injury as a result of collision with another person, fence, ball, bat and/or playing surface; 3) Neck or spinal injury as a result of a collision with a person, fence, ball and/or bat.

SEVERE INJURIES RELATED TO THE INHERENT RISKS OF SOFTBALL INCLUDE BUT ARE NOT LIMITED TO: 1) Broken bones or teeth, concussion, severe bruises, tissue injury related to a collision with a person, fence, bat, ball, field surface and/or equipment; 2) Broken bones or teeth, severe bruises, damage to tendons, ligaments, and muscles as a result of falling or sliding.

Health Status Agreement

I agree not to participate in JSA activities if I exhibit the current CDC recognized symptoms consistent with COVID-19. Reference the following links for the most recent information regarding COVID-19: https://juneau.org/covid-19, https://covid-19, https://covid-19, https://covid-19, https://covid-19, https://covid-19. https://covid-19

EXEMPTION FROM LIABILITY: I recognize the activity, softball, for which I am registering, involves an inherent risk of damage, loss and personal injury. I waive and release the Juneau Sports Association, Inc. and the City and Borough of Juneau, their owners, officers, agents, servants, employees, and lessors from any and all liability claims, demands, actions, or causes of actions whatsoever arising out of any damage, loss, or personal injury suffered or sustained by me in connection with or arising out of any and all activities contemplated by this agreement, whether such loss, damage, or personal injury results from the negligence of the Juneau Sports Association, Inc., the City and Borough of Juneau, or their owners, agents, servants, employees, or lessors, or from some other cause. Further, I agree to defend, indemnify, and hold harmless the Juneau Sports Association and the City and Borough of Juneau or any of their agents, employees, servants or representatives from any claims brought against them by parties claimed by me to be responsible for any damage or loss that I incur.

I hereby certify that I have read, understand, and agree to the above statements.	
Signature:	Date:
Parent/Guardian signature if under 18 years of age:	Date:

□Player □Non-Player ROSTER INFORMATION (Please Print Clearly)	☐ Men's	☐ Women's	□ Co-ed
Name:			
Contact Phone:			
Mailing Address:	_		
City: Zip:			
E-mail Address:			
Team Name:			
Please indicate OTHER leagues/divisions in which you play:			
□ Women's C □ Women's D □ Women's E □ Women's F			
\square Men's C \square Men's D \square Men's E \square Men's F			
\square Co-ed C \square Co-ed D \square Co-ed E \square Co-ed F \square Co-e	d G		

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