Social Boston Sports, LLC
Player Waiver Form

ALL PLAYERS MUST BE 18+

Participant Information

Please Print Clearly

Team Name: _____ League: _____

First Name: _____ M.I. _____ Last Name: _____

Date of Birth: m: _____ d: _____ y: _____ Gender (circle one): M F

Emergency Contact Person: _____

Relation: _____

Emergency Contact Phone Number: _____

Event Information

Name of Event: **Softball League**
Event Host: **Social Boston Sports, LLC**

Waiver Section – Please Read and Sign

Release and Indemnity
READ CAREFULLY BEFORE SIGNING

In consideration of my participation in the Event referenced above and any related activities (collectively, the "**Event**"), wherever the Event may occur, I agree to assume the risks incidental to such participation (which risks may include, among other things, muscle injuries and broken bones). I acknowledge that, if present at the Event, I have or will inspect the facilities and equipment to be used in conjunction with the Event and, if I believe any unsafe condition exists, I will immediately advise an Event official of such condition and will refuse participation until such condition is corrected. On my own behalf, and on behalf of my heirs, executors, administrators and next of kin, I hereby release, covenant not to sue, and forever discharge the Released Parties (as defined below) of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with my participation in the Event and/or any such activities, and further agree to indemnify and hold each of the Released Parties harmless from and against any and all such liabilities, claims, actions, damages, costs, or expenses including, but not limited to, all attorneys' fees and disbursements up through and including any appeal. I understand that this release and indemnity includes any claims based on the negligence, action or inaction of any of the Released Parties and covers bodily injury (including death), property damage, and loss by theft or otherwise, whether suffered by me either before, during or after such participation. I declare that I am physically fit and have the skill level required to participate in the Event and/or any such activities. I further authorize medical treatment for myself and/or my child or ward, at my cost, if the need arises. I also understand that I may be required to leave the Event venue should I exhibit undesirable conduct. For the purposes hereof, the "**Released Parties**" are Social Boston Sports, LLC, cities and departments that allow us the use of their playing fields; and the officers, directors, employees, agents, representatives, successors, assigns and volunteers of each of the foregoing entities.

I further grant the Released Parties the right to photograph and/or videotape me and further to display, use and/or otherwise exploit my name, face, likeness, voice, and appearance forever and throughout the world, in all media, whether now known or hereafter devised, throughout the universe in perpetuity (including, without limitation, in online webcasts, television, motion pictures, films, newspapers, and magazines) and in all forms including, without limitation, digitized images, whether for advertising, publicity, or promotional purposes, including, without limitation, publication of Event results and standings. The Released Parties are, however, under no obligation to exercise any rights granted herein.

This Waiver and Permission Form shall be governed by the laws of the State of Massachusetts, and any legal action relating to or arising out of this Waiver and Permission Form shall be commenced exclusively in the Court of the Norfolk County, Massachusetts (or if such Circuit Court shall not have jurisdiction over the subject matter thereof, then to such other court sitting in such county and having subject matter jurisdiction). I certify I am 18 years of age or older and the information set forth above pertaining to myself true and complete.

_____	_____	_____
Date	**Signature Required**	**Print Name**