

## San José Mens Senior Baseball League 2011 Player Participation Waiver

PRINT First Name :			
PRINT Last Name :			
Street Address :			
City:	State :	Zip:	
Home Phone:	Work:	Cell:	
Date of Birth :	Age:	SJMSBL League Team:	
Email Address :			
Senior Baseball League, I I will observe and abide b I understand that fighting, use of abusive or offensiv	ent to the following parameters as hereafter referred to as the SJMS by all rules as established by the Sphysical abuse or threatening be by language will not be tolerated by	BL.  JMSBL.  havior towards any player, y the SJMSBL and violatio	umpire, spectator, or the
I certify that I am, or will to	pension from the League and forfe ourn 18 years of age (18+ divisions dentification or proof of age at any	) or 25 years of age (25+ o	
or my person while partici	oonsibility, including all costs, for a sipating in <b>ANY</b> SJMSBL activity, on the sole of	game, practice, or function	, including, but not limite
I realize the SJMSBL staf	f, team managers or facilities do N	NOT possess a defibrillator	·.
I realize there is no guara	nteed of playing time on any team	n during the regular or post	season games.
I certify the following:	I played high school baseball: I played college baseball: I played pro baseball: Last year played pro: Highest level of pro ball:	Y N Y N Y N	
By signing this agreemen officials and agents from a	t I release the San José Mens Se any liabilities or cost.	nior Baseball League (SJN	ISBL), its officers,
fully agree that the terms	s and conditions of this agreemen	t are binding and all staten	nents are true.
 Player's Signature			 Date