

San José Mens Senior Baseball League 2012 Player Participation Waiver

PRINT Last Name :			
Street Address :			
City:	State :	Zip	·:
Home Phone:	Work:	Ce	II:
Date of Birth :	Age:	SJMSBL Leagu	e Team:
Email Address :			
	ent to the following parameters as hereafter referred to as the SJMS		cipation in the San José Mens
I will observe and abide to refundable fee to particip	by all rules established by the SJM ate in the league.	SBL and understa	nd that I must pay a non-
use of abusive or offensive	, physical abuse or threatening belive language will not be tolerated by bension from the League and forfe	y the SJMSBL and	d violation of this rule could re
	urn 18 years of age (18+ divisions identification or proof of age at any		
or my person while partic	ponsibility, including all costs, for a ipating in ANY SJMSBL activity, god or scheduled functions are solely	game, practice, or	function, including, but not lim
I realize the SJMSBL sta	ff, team managers or facilities do N	IOT possess a de	fibrillator.
I realize there is no guara	anteed of playing time on any team	during the regula	r 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 agreemer officials and agents from	nt I release the San José Mens Ser any liabilities or cost.	nior Baseball Leag	gue (SJMSBL), its officers,
I fully agree that the term	s and conditions of this agreemen	are binding and a	all statements are true.
			Date