

Player Addition Form  
 This is a waiver and release agreement  
 City of LaPorte – LaPorte Park and Recreation Department  
 Adult Sports Leagues

**WAIVER AND RELEASE OF ALL CLAIMS**

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 adult team and league indicated below.
2. I understand that there are certain risks and hazards involved in participating in adult 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, disease, and other participants.
3. I understand that playing in sports 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 game is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching the ball, the swinging of the bat, running, jumping, stretching, sliding, 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.

I am voluntarily participating in this activity with the knowledge of the risks which includes contracting a disease like COVID-19.

Further, I, the undersigned player, agree that in consideration for the right to play as a member of the team designated below and in consideration for permission to play at the facility arranged for by the team or league:

1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) 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 (C) while on or upon the premises of any and all of the facilities arranged for by my team or league for practice or play.
2. I release, discharge and agree not to sue the team and league designated below, the field/facility owner or other entity designated below, the National Softball Association, La Porte School Corporation, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field, facility, National Softball Association, La Porte School Corporation, or City of La Porte for any claim, damages, costs, or cause of action which I have or may in the future have as a result of injuries 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.

		LP Park & Rec-City of LaPorte
Name of Team	Name of League	Facility Owner or Other Entity
Name (print) _____ Address _____		
City _____	State _____	Zip _____ Phone _____ Age _____
Employment _____ Signature _____		

250 Pine Lake Ave.  
 La Porte, IN 46350  
 219.326.9600



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