



**PLAYER CONTRACT & ROSTER – Men’s Slowpitch Softball League (16 and Older)
SPRING 2021**

Team Name: _____

The undersigned agrees, in the event he or she participates in the Panama City Beach Sports Complex Softball League as a member or participant of any club, that:

1. He or she will abide by all rules and regulations of the League.
2. He or she will not sign any contract or play with any other club other than that designated below until a release from that club is filed with the Panama City Beach Sports Complex Leagues and Programs Department.
3. The execution of this agreement shall constitute a waiver and a release of any and all claims and causes of actions at law or equity for injuries, including diseases, and death to the undersigned, resulting from his or her participation in league activities or in any way associated therewith against the Panama City Beach Sports Complex, the City of Panama City Beach, the Club of which he/she is a member and the sponsors thereof.
4. He/she will return all property issued by the club or league to the undersigned at such time as the undersigned ceases to participate in the league or at the end of the playing season.
5. This agreement shall not be effective until signed by the undersigned and a club manager and accepted by the Panama City Beach Sports Complex.
6. The terms and provisions of the agreement, once accepted and approved, shall apply during all periods of the undersigned’s participation in league activities with the club designated below or any subsequent club of which the undersigned may become a member and from season to season for so long as the undersigned participates in aforementioned league play or any other league.

	Print Name:	Age:	Address:	Phone #:	Signature:	Shirt Size:
1						
2						
3						
4						
5						
6						
7						
8						

	Print Name:	Age:	Address:	Phone #:	Signature:	Shirt Size:
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						

Team Manager Name: _____

Phone Number: (_____) _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____

OFFICE USE ONLY:

 Receipt Number

 League Registration No.

 Date Released/Transferred