

Montgomery County Senior Softball League

2021 Player Application for Summer Season

Note: If you are applying to join the MCSSL as a new player, complete and send this application **but do not send a check**. You will be notified when there is an opening and you can submit your check at that time.

Instructions:

1. This application is for the **2021 Summer season**.
2. See page 2 for the weekly game schedule.
3. **ALL players** must accept the terms and conditions of the Release and Waiver of Liability on pages 4 and 5.
4. **ALL players** must sign and submit the application and the Release and Waiver of Liability.
5. All players must be a minimum of 60 years old in 2021.
6. The division assignment for each player will be the same as in 2020.
7. **Late fee = \$20** if sent after February 28, 2021.
8. The Covid pandemic is continuing into 2021 so the **Covid Health & Safety plan** will be implemented for, at least, the beginning of the 2021 season.
9. **If you do not plan to return for the 2021 season, please send an email to:**
jmarple15@gmail.com.

Complete and mail pages 3,4, and 5 along with a fee check made out to MCSSL by February 28th to:

Jim Marple
270 Freeland Drive
Collegeville PA 19426

General Information:

1. MCSSL games are played during the day. Start times range between 9:00 am and 1:30 pm.
2. Everyone plays and bats. Our league's mission is safety, fun, sportsmanship, exercise, laughs, camaraderie, and winning – in that order of importance. If you had fun you won!
3. All players play at their own risk and must have medical insurance coverage for any softball related injuries. Check with your doctor to make sure you have no medical restrictions. Play it safe – get a check-up before you play – know your limitations and skill level.
4. Player requirements are that you be able to run, field, throw, and bat with an acceptable level of competence. The Commissioner or Division Director have the final say regarding the assessment of your playing capabilities and acceptance. Player safety is our utmost concern.
5. Bats: Single-wall aluminum bats are provided by the league. No outside bats are permitted.
6. Additional information and our league rules are available on our website – www.mcssl.org.

Division Information for 2021 Season

NOTE: Please review the explanation of the outdoor summer divisions and the game schedule carefully before indicating your preferences for the next season.

Blue Division: This division is for players seeking a more relaxed style of play. There will be 6 teams in this division and two games per week for each team. See the schedule below -- Blue teams play on Monday, Wednesday, and Thursday. **Fee is \$100.**

White Division: This division is for players seeking a more competitive style of play. There will be two games per week for each team. There will be 8 teams in this division. Acceptance to play in the White Division is not guaranteed. See the schedule below -- White teams play 2 games per week on Tuesday, Wednesday, and Thursday. **Fee is \$100.**

Red Division: This division is for White Division players seeking a third game each week with an advanced competitive style of play. There will be one game per week for each team. We expect there will be 4 teams in this division. White division members may apply to play in the Red Division but acceptance to play in the Division is not guaranteed. Selection is based on your playing ability. See the schedule below -- Red teams play on Monday. **Fee is \$25.**

Red Division Substitute: You can be a substitute player if you do not want to be a full time Red player. **Fee is \$10**

2021 Summer Weekly Game Schedule - Blue, White, & Red Divisions

April thru May & Sep 14 thru Oct				
	MON	TUE	WED	THU
9:00	BLUE	WHITE	BLUE	WHITE
10:30	BLUE	WHITE	BLUE	WHITE
12:00	RED	WHITE	WHITE	BLUE
1:30	RED	WHITE	WHITE	BLUE
June/July/August up to Sep 14				
	MON	TUE	WED	THU
9:00	BLUE	WHITE	BLUE	BLUE
10:30	BLUE	WHITE	BLUE	BLUE
12:00	RED	WHITE	WHITE	WHITE
1:30	RED	WHITE	WHITE	WHITE

MCSSL Player Application for 2021 Summer

PLEASE PRINT CLEARLY and COMPLETE ALL APPLICABLE LINES

First Name:	Last Name:
Age:	Date of Birth:
Address:	
Home phone:	Cell phone:
Email:	Emergency contact:
Emergency home phone:	Emergency cell phone:
Preferred positions: P C 1 2 3 SS SF OF Any	
Shirt size: S M L XL 2XL 3XL	First name on your shirt:
Player number:	
Your team(s) last season:	

I acknowledge that the above information is correct, and that I have carefully read and accept all provisions in the attached Assumption of Risk - Release and Waiver of Liability, which is incorporated herein by reference, and agree to abide by all the terms and conditions.

Signature: _____ Date: _____

Note: To play in the Red Division, you must be a White Division player.

If you paid for the 2020 season but did not play, you have a credit towards the 2021 season. Please initial below if this applies to you.

_____ : **Please apply my credit from the 2020 season**

Blue or White Div (\$100) : Red Div (\$25) : Red Div Sub (\$10)

Late fee: (\$20) -- only applies to returning MCSSL players if submitted after Feb 28, 2021

Total Submitted: \$ _____ Your Check #: _____ (payable to MCSSL)

(Send this page and the waiver to: J. Marple, 270 Freeland Drive, Collegeville PA 19426)

ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT RELATING TO ANY INJURIES, AS WELL AS RISKS ASSOCIATED WITH EXPOSURE TO COVID-19 VIRUS

The persons to whom this Agreement applies are, as follows:

Adult Participant Name: _____

IN CONSIDERATION for myself being permitted to utilize the services, utilize the facilities and/or participate in the programs of the MONTGOMERY COUNTY SENIOR SOFTBALL LEAGUE (MCSSL), including, but not limited to, observation or use of facilities or equipment, or participation in or acting as a spectator during any program affiliated with the MCSSL, the undersigned, on behalf of himself or herself and such children and any personal representatives, heirs, and next of kin (hereinafter referred to as "the undersigned") hereby acknowledges, agrees and represents that he or she has inspected and carefully considered such premises, equipment, and facilities and has considered the MCSSL's programs and that the undersigned finds and accepts same as being reasonably safe and reasonably suited for the use or participation by the undersigned.

I understand that there are certain risks and hazards involved in participating in softball, including, but not limited to those hazards associated with weather conditions, playing conditions, equipment, and other participants in addition to the acts of pitching, throwing, fielding and catching the ball, swinging the bat, running, jumping, stretching, sliding, diving, and collisions with other players and stationary objects, all of which can cause serious injury or death to me and to other players. Further, I agree that in consideration for the right to play as a member of the MCSSL and in consideration for permission to play on fields arranged by the league and use equipment provided by the league I voluntarily elect and accept and solely assume all risks of damages, injury, including death, incurred or suffered by me:

- (a) While practicing or playing as a member of the MCSSL;
- (b) While serving in a non-playing capacity as an MCSSL member or observer during practice or play by other teams or by other players on my team; and
- (c) While on the premises of any and all of the fields arranged for by my team or league for practice or play.
- (d) While participating in, or attending, any function run or sanctioned by the MCSSL

In addition, the undersigned acknowledges that novel coronavirus ("COVID-19") infections have been confirmed throughout the United States, including cases in the undersigned's own State and locality. In accordance with the most recent guidance and recommendations issued by the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), undersigned's own State's Department of Health (DOH) for slowing the transmission of COVID- 19, the undersigned hereby agrees, represents, and warrants that the undersigned shall not visit or utilize the facilities, services, and/or programs of the MCSSL (other than any exclusively online services and programs) within 14 days after (i) returning from highly impacted areas (ii) exposure to any person who has a suspected or confirmed case of COVID-19. The undersigned hereby agrees, represents, and warrants that the undersigned shall not participate in, visit or utilize the facilities, services, and/or programs of the MCSSL if he or she experiences symptoms of COVID-19, including, without limitation, fever, cough, loss of sense of taste or smell, or shortness of breath, or has a suspected or diagnosed/confirmed case of COVID-19. The undersigned agrees to notify the MCSSL immediately if he or she believes that any of the foregoing access/use restrictions may apply.

The MCSSL has taken certain steps to implement certain recommended guidance and recommendations issued by public health agencies for slowing the transmission of COVID-19, including, without limitation, the access/use restrictions set forth above. The undersigned acknowledges and agrees that the MCSSL may revise its procedures at any time based on updated recommended guidance and recommendations issued by public health agencies and further agrees to comply with the MCSSL's revised procedures prior to utilizing the facilities, services, and/or prior to participating in the programs of the Organization. This includes restricting access to facilities and programs when body temperatures are high or rules are not complied with. The undersigned further acknowledges and agrees that due to the nature of the facilities, services, and programs offered by the MCSSL, social distancing of 6 feet per person among participants or others is not always possible. The undersigned fully understands and appreciates both the known and potential dangers of participating in the programs and/or utilizing the facilities and services of the MCSSL and acknowledges that use thereof by the undersigned may, despite the MCSSL's efforts to mitigate such dangers, result in exposure to COVID-19, which could result in quarantine requirements, serious illness, disability, and/or death.

IN FURTHER CONSIDERATION of being permitted to participate in the MCSSL's programs, the undersigned hereby agrees to the following:

The undersigned, hereby releases, waives, discharges and covenants not to sue the MCSSL or its governing body, USA Softball, or any of their respective directors, officers, employees, volunteers and agents, or any of the fellow participants or their family members or guests from all liability to the undersigned or such children and all personal representatives, assigns, heirs, and next of kin of the undersigned for any loss

or damage, and any claim or demands on account of any property damage or any injury to, or an illness or the death of, the undersigned or any person who may contract COVID-19, directly or indirectly, whether caused by the negligence, active or passive, of the MCSSL or otherwise while the undersigned is in, upon, or about the premises or any facilities or using any equipment of or participating in any program of or affiliated with the MCSSL. To the extent such statute applies, the undersigned also expressly and knowingly waives all rights under Pennsylvania Law.

THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY, DEFEND AND HOLD HARMLESS the MCSSL, its national governing body, USA Softball, and any of its respective directors, officers, employees, volunteers and agents, and each of them, from any loss, liability, damages or costs they may incur, whether caused by the Organization's negligence, active or passive, or otherwise while the undersigned is participating in any program of the MCSSL or in, upon, or about the premises or any facilities or equipment affiliated with the MCSSL. The undersigned understands and agrees that neither the MCSSL or USA Softball is required to provide insurance to cover the undersigned in the event he or she suffer illness, injury, death, property loss, theft or damage of any sort upon, or about the premises or any facilities or equipment therein or while participating in any program affiliated with the MCSSL.

THE UNDERSIGNED further expressly agrees that the foregoing ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the laws of the State in which the undersigned resides or participates and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE CAREFULLY READ AND VOLUNTARILY SIGN THIS ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE. I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM GIVING UP VALUABLE LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES FROM THE ORGANIZATION IN CASE OF ILLNESS, INJURY, DEATH OR PROPERTY LOSS OR DAMAGE, INCLUDING, FOR THE AVOIDANCE OF DOUBT AND WITHOUT LIMITATION, EXPOSURE TO COVID-19 AT ANY MCSSL FACILITY OR DURING PARTICIPATION IN ANY PROGRAM, AND ANY ILLNESS, INJURY OR DEATH RESULTING THEREFROM. I UNDERSTAND THAT THIS DOCUMENT IS A PROMISE NOT TO SUE AND A RELEASE OF AND INDEMNIFICATION FOR ALL CLAIMS.

I have read and understand the terms of this Assumption of Risk, Release and Waiver of Liability, and Indemnity Agreement and agree to its terms.

Print Name _____

Signature _____

Date _____

MCSSL Division _____