



PLYMOUTH RECREATION DEPARTMENT
26 COURT ST
PLYMOUTH, MA 02360
508-747-1620 x10137

Plymouth Coed Softball League Season: FALL 2025

TEAM ROSTER & WAIVER AGREEMENT

Name of Team/Sponsor _____

Manager Name _____ **Phone** _____

Mailing Address _____

Email _____

Asst. Manager _____ **Phone** _____

Mailing Address _____

Email _____

Entry Fee: \$650.00 Rec'd by _____ Date _____

The team manager and assistant manager have a copy of the rules and regulations of the Recreational Coed Softball League, and agree to abide by them. Infringement of these rules and regulations could be subject to expulsion from league.

Manager Signature

Assistant Manager Signature

MAX 20 PLAYERS PER ROSTER

In consideration of being permitted to participate in the Plymouth Recreation Coed Adult Softball League, (hereinafter "Program") I, the undersigned, on behalf of the participant listed above (hereinafter "Participant"), and for myself, my heirs, personal and/or legal representatives, next of kin, and assigns (hereinafter collectively referred to as "I" or "ME"), hereby:

1. RELEASE, WAIVE, DISCHARGE and COVENANT NOT TO SUE the Town of Plymouth, its agents, servants, employees, officials, volunteers, contractors, representatives (hereinafter the "Town") from any and all liability, claims, demands, actions, suits, loss and causes of action whatsoever arising out of or related to any loss, damage, or injury, including, but not limited to, death, illness, injury and/or disease, and including any death, illness, injury and/or disease in any way related to or arising out of the novel coronavirus (COVID-19), that may be sustained by the Participant and/or arising out of or related to the Participant's participation in the Program, regardless of whether they arise in tort, contract, strict liability, or other legal theory.
2. INDEMNIFY, SAVE and HOLD HARMLESS the Town from any and all liability, claims, demands, actions, suits, loss, and causes of action and any cost it may incur, including court costs and attorneys' fees, arising out of or related to the Participant's participation in the Program, regardless of whether they arise in tort, contract, strict liability, or other legal theory.
3. ACKNOWLEDGE that the Participant's participation in the Program may be dangerous and may involve the risk of serious injury and/or illness, including COVID-19, and/or death and CONSENT to the Participant's voluntary participation and ASSUME full responsibility for any risk of loss, death, illness, injury and/or disease which I and/or the Participant may sustain arising out of or related to the Program whether known or unknown and whether caused by the negligence of the Town or otherwise.
4. AGREE that this Release and Waiver of Liability and Indemnity Agreement shall be construed in accordance with the laws of the Commonwealth of Massachusetts and that, in the event any portion of this document is deemed unlawful or unenforceable, said portion shall be severable and the balance of the terms shall continue in full legal force and effect.
5. AGREE that I, the undersigned, am the parent or legal guardian of the Participant. I hereby execute this Release and Waiver of Liability and Indemnity Agreement on the Participant's behalf. I understand that by executing this agreement on behalf of the Participant, I am binding the Participant and ME to the terms of this Release and Waiver of Liability and Indemnity Agreement.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS, INCLUDING MY RIGHTS AND THE RIGHTS OF THE PARTICIPANT BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW

PLEASE PRINT CLEARLY

1.			
	Player's Name	Home Phone / Cell Phone	
	Address		
	Street	Town	Zip
	Email		
	Signature		
2.			
	Player's Name	Home Phone / Cell Phone	
	Address		
	Street	Town	Zip
	Email		
	Signature		
3.			
	Player's Name	Home Phone / Cell Phone	
	Address		
	Street	Town	Zip
	Email		
	Signature		
4.			
	Player's Name	Home Phone / Cell Phone	
	Address		
	Street	Town	Zip
	Email		
	Signature		
5.			
	Player's Name	Home Phone / Cell Phone	
	Address		
	Street	Town	Zip
	Email		
	Signature		
6.			
	Player's Name	Home Phone / Cell Phone	
	Address		
	Street	Town	Zip
	Email		
	Signature		
7.			
	Player's Name	Home Phone / Cell Phone	
	Address		
	Street	Town	Zip
	Email		
	Signature		

8. _____
Player's Name _____ Home Phone / Cell Phone _____
Address _____
Street _____ Town _____ Zip _____
Email _____
Signature _____

9. _____
Player's Name _____ Home Phone / Cell Phone _____
Address _____
Street _____ Town _____ Zip _____
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Signature _____

10. _____
Player's Name _____ Home Phone / Cell Phone _____
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Street _____ Town _____ Zip _____
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11. _____
Player's Name _____ Home Phone / Cell Phone _____
Address _____
Street _____ Town _____ Zip _____
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12. _____
Player's Name _____ Home Phone / Cell Phone _____
Address _____
Street _____ Town _____ Zip _____
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Signature _____

13. _____
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Street _____ Town _____ Zip _____
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14. _____
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15. _____
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Street _____ Town _____ Zip _____
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16. _____
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Address _____
Street _____ Town _____ Zip _____
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17. _____
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Address _____
Street _____ Town _____ Zip _____
Email _____
Signature _____

18. _____
Player's Name _____ Home Phone / Cell Phone _____
Address _____
Street _____ Town _____ Zip _____
Email _____
Signature _____

19. _____
Player's Name _____ Home Phone / Cell Phone _____
Address _____
Street _____ Town _____ Zip _____
Email _____
Signature _____

20. _____
Player's Name _____ Home Phone / Cell Phone _____
Address _____
Street _____ Town _____ Zip _____
Email _____
Signature _____