



**RECREATION AND COMMUNITY SERVICES DEPARTMENT**

CUPERTINO SENIOR CENTER

21251 STEVENS CREEK BLVD, CUPERTINO, CA 95014

(408) 777-3150 • FAX (408) 777-3156

**CUPERTINO**

**50+ Softball: Thursday, March 24 – October 20, 2016**

1. This program is open on Thursday, 9am - 12pm.
2. Participants must check-in before starting to play.
3. All players must be enrolled in the current Sandlot Social session and fill out form below. Players must bring their receipt with them.
4. Everyone must follow the guidance of the steering committee member on duty as necessary.
5. Rules of the Game – A copy of the Sandlot Social game rules will be available to view on the field during the program or may be requested from the senior center front desk.
6. Dress code: participants must wear appropriate sports attire – no metal cleats.
7. Please remember, safety first - report all accidents immediately.

**CODE OF CONDUCT, RELEASE OF LIABILITY, ASSUMPTION OF RISK & INDEMNIFICATION AGREEMENT**

**Code of Conduct** – As a participant of the Sandlot Social, I agree to conduct myself in a respectful manner and adhere to the “Code of Conduct.” This includes at all times: immediately before, during, and after my participation in or presence at any social event or activity. I will:

- Accept the decisions of the Umpire(s), Volunteer(s), Recreation Coordinator(s), and/or Recreation Supervisor(s)
- Avoid any bodily contact
- Refrain from publicly criticizing or denigrating any participant, volunteer, or spectator
- Never direct abusive or profane language at participants, volunteers, or staff members
- Never conduct myself in such a manner as to bring discredit upon myself, another participant, and/or embarrassment within the community

**Violations of the Code of Conduct may result in:**

**receiving a verbal and/or written warning; restricting and/or suspension from the program.**

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 softball social.
2. I understand that there are certain risks and hazards involved in participating in softball 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, and other participants.
3. I understand that the very nature of the game of softball is hazardous and risky, including, but not limited to the acts of pitching, throwing, fielding, and catching of 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.

In consideration for the acceptance of my application for participation in or presence at the aforementioned activity, I HEREBY WAIVE, RELEASE AND DISCHARGE, the Cupertino Recreation and Community Services Department, the Cupertino Public Facilities Corporation, and the City of Cupertino, their agents and employees FROM AND AGAINST ANY AND ALL LIABILITY FOR ANY LOSS, PERSONAL INJURY, INCLUDING DEATH, OR PROPERTY DAMAGE THAT MAY HAVE ARISEN OUT OF, OR IN ANY WAY CONNECTED WITH, MY PARTICIPATION OR PRESENCE AT THE AFOREMENTIONED EVENT, AND HEREIN RELEASED, BUT DO NOT RELEASE THE ABOVE MENTIONED PERSONS OR ENTITIES FROM THEIR FRAUDULENT OR INTENTIONAL ACTS OR FOR THEIR NEGLIGENT VIOLATIONS OF STATUTORY LAW.

Furthermore, I assume all responsibility and agree to indemnify the City of Cupertino for any loss, damage or injury to my property, or myself, which may have been caused by negligence, or any act, of any person connected in any way with the aforementioned event. I understand that the City of Cupertino does not guarantee the construction, condition, or safety of the facilities or the equipment and that this Release Agreement is to be binding on heirs, my assigns and me. I agree to allow use of my photograph for program publicity. I HAVE READ THE ABOVE, UNDERSTAND ITS MEANING AND VOLUNTARILY SIGN IT.

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Concerns: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_