RELEASE OF LIABILITY & ASSUMPTION OF RISK AGREEMENT Player's Name: Team Name: Date of Birth: _____ Highest Level of Ball Played: ____ Res. Address: City: _____ Postal Code: ____ Tel. - Res.: (_____) _____ Ext: _____ Cell: (_____) ____ Fax: (_____) _____ E-mail-2: E-mail-1: _____ I work in the City of: P/C: _____ Bus. Address: _____ I have played in RSPA Slo-Pitch League for _____ years I also play in another League: _____ $_{-}$ (please print name clearly), the undersigned, hereby acknowledge and agree to abide by the Rules of Play, Constitution and By-Laws for the "Recreational Slo-Pitch Association" (hereinafter referred to as R.S.P.A.), as voted and adopted by the League Executive. I also agree to release and absolve R.S.P.A., League Executives, Team Representatives, Umpires, Players, Coaches, Sponsors, The City of Toronto, The City of Etobicoke, The City of Mississauga, City of Brampton, Slo-Pitch National Softball Inc. and any of their Representatives, etc. of any and all responsibility and/or liability for any personal injury, loss and/or damages, that may occur as a result of my participation and/or attendance in League and/or Tournament play, however caused. I acknowledge that I understand the above release; and that all information given above is complete and accurate, to the best of my knowledge, as of this date. Signature: Date: Witness (Team Rep) Signature: RELEASE OF LIABILITY & ASSUMPTION OF RISK AGREEMENT ☐ Male ☐ Female Player's Name: Year: Team Name: ____ Date of Birth: _____ Highest Level of Ball Played: _____ Res. Address: Postal Code: ____ Tel. - Res.: () Bus.: () Ext: Fax: (_____) _____ Cell: (_____) ____ _____ E-mail-2: _____ E-mail-1: __ I work in the City of: P/C: _____ I have played in RSPA Slo-Pitch League for years I also play in another League: (please print name clearly), the undersigned, hereby acknowledge and agree to abide by the Rules of Play, Constitution and By-Laws for the "Recreational Slo-Pitch Association" (hereinafter referred to as R.S.P.A.), as voted and adopted by the League Executive. I also agree to release and absolve R.S.P.A., League Executives, Team Representatives, Umpires, Players, Coaches, Sponsors, The City of Toronto, The City of Etobicoke, The City of Mississauga, City of Brampton, Slo-Pitch National Softball Inc. and any of their Representatives, etc. of any and all responsibility and/or liability for any personal injury, loss and/or damages, that may occur as a result of my participation and/or attendance in League and/or Tournament play, however caused. I acknowledge that I understand the above release; and that all information given above is complete and accurate, to the best of my knowledge, as of this date.

_____ Date: _____ Witness (Team Rep) Signature: _____