

DES MOINES SEMI-PRO BASEBALL LEAGUE PLAYER AGREEMENT

NAME: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PHONE (CELL) _____ (HOME/WORK) _____

DATE OF BIRTH _____ AGE _____

PREVIOUS BASEBALL _____ WHERE _____ WHEN _____

HIGH SCHOOL _____

COLLEGE _____

OTHER _____

POSITIONS _____

THROW: R/L BAT: R/L/S HEIGHT _____ WEIGHT _____

(FOR LEAGUE USE ONLY)

REGISTRATION PAID BY: CASH _____ CHECK _____

RECEIVED BY: _____ (DATE)

IMPORTANT NOTICE

DISCLAIMER OF LIABILITY: The Des Moines Semi-Pro Baseball League (DMSBL) does not provide injury or liability insurance on any player. The player understands and agrees that he shall **RELEASE AND HOLD HARMLESS DMSBL**, its' agents, officers and directors for any injuries suffered by him in connection with participation in DMSBL.

UNIFORM: Player agrees, if issued a uniform, to return said uniform to DMSBL at a place and time to be designated. Player agrees that failure to return said uniform will result in forfeiture of any uniform deposit. Player also understands that he may be subject to small claims court proceedings and liable for the full value of the uniform as well as court costs associated with the claim against him.

REFUND: There will be NO refund of the league registration fee after the player has participated in one regular season game.

SIGNATURE BELOW SIGNIFIES PLAYER AGREEMENT TO THE ABOVE TERMS.

PLAYER _____ DATE _____

AGENT OF LEAGUE _____ DATE _____