

ADULT BASEBALL – INJURY ACKNOWLEDGEMENT & INDEMNITY (SHORT FORM)

Player Name: \_\_\_\_\_

Date: \_\_\_\_\_

I acknowledge that I am currently injured or dealing with a physical condition. I understand that playing baseball while injured may worsen my condition or cause new injuries.

I choose to participate voluntarily and accept full responsibility for any injury, aggravation, or consequences that may occur as a result of playing while injured.

I release and hold harmless the league, team, organizers, coaches, officials, volunteers, and facility owners from any liability or claims arising from my participation while injured, whether caused by negligence or otherwise, as permitted by law.

I confirm I am at least 18 years old and am signing this agreement voluntarily.

Player Signature: \_\_\_\_\_

Printed Signature: \_\_\_\_\_