

DELAWARE VALLEY BASEBALL CONFERENCE, INC.

PLAYERS CONTRACT

I, _____ do hereby
agree to play with _____ baseball team
during the season of _____.

I promise to be governed by the Constitution and by-laws of the conference. I further
promise to return all team or league property placed in my custody or loaned for use on
demand or upon being released from the above mentioned team.

Age _____ Date of Birth _____ Phone # _____

(Players Sign here)

CONSENT OF PARENT OR GUARDIAN

As parent or legal guardian of _____, I
understand that injuries are inherent to sports, therefore in the event of an injury, I hereby
release the Delaware Valley Baseball Conference, Inc., its officers and volunteers, as well
as all sponsors from all liability. I also understand that primary medical insurance is my
responsibility and that any insurance my player's team may carry will be secondary.

If I am not present for a team-related activity, I hereby give permission for the
administration of any and all medical attention necessary for my child in the event of an
accident, injury, sickness, etc. under the direction of an authorized team representative or
volunteer.

Date _____ Signed _____
(Parent or Guardian)

Address _____

(Manager Sign Here)

(Secretary Use Only)

(Date of registration and eligibility)

