



## New Player Registration Application for 202) Season

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

Street Address & Town: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Shirt Size: \_\_\_ Large                      \_\_\_ XL                      \_\_\_ XXL

Positions You Can Play: \_\_\_\_\_

Preferred Position: \_\_\_\_\_

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Fee includes team shirt, cap, socks, insurance fee, and 16 total practices & games. Player must provide own glove, spikes, baseball pants, batting helmet & bat(s). Player must be at least 55 years old during calendar 202) .  
To ensure playing time for all, only the first 36 applications will be accepted.

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To pre-register, please complete all three pages of this form, enclose with your \$140 entry fee (payable to "Still Playin' Baseball 55+") & a photocopy of your driver's license, and mail to:

Still Playin' Baseball 55+  
c/o Richard Teimer  
124 Cottonwood Lane  
Centerville, MA 02632

Website: [www.cape55baseball.org](http://www.cape55baseball.org)

Email: [info@cape55baseball.org](mailto:info@cape55baseball.org)

**STILL PLAYIN' BASEBALL 55+**  
**Cape Cod Senior Baseball Association**  
**Player Participation Agreement**



**Name (Please Print):** \_\_\_\_\_  
**Street Address, Town:** \_\_\_\_\_  
**Date Of Birth:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_  
**Cell Phone Number:** \_\_\_\_\_  
**Day Phone:** \_\_\_\_\_ **Night Phone:** \_\_\_\_\_



I hereby understand, agree and consent to the following conditions of my participation in Still Playin' Baseball 55+:

- All players are, or will turn, at least 55 years of age this calendar year and agree to provide a copy of their Massachusetts ID or Drivers License as proof of age.
- All players must sign a Player's Waiver & Consent form in order to participate.
- Fighting, physical abuse of players, umpires, or spectators, and the use of abusive or offensive language are not permitted. Violation of these sportsmanship requirements could result in suspension and/or banishment from Still Playin' Baseball 55+ and forfeiture of all fees paid.

By signing this Agreement, I release Still Playin' Baseball 55+ from any liabilities or cost, and I fully agree that the terms of this Agreement are binding.

\_\_\_\_\_

Player's Signature

\_\_\_\_\_

Date

**STILL PLAYIN' BASEBALL 55+**  
**Cape Cod Senior Baseball Association**  
**Player's Waiver and Consent**

**Warranty of Player's Fitness**

The undersigned (hereinafter "the Player") hereby warrants to Still Playin' Baseball 55+ (hereinafter, SPB55) that he is 55 years of age or older during the current calendar year, is in good physical condition, and that he has no impairment or ailment preventing him from in engaging in these baseball activities.

**Absolute Release of Liability**

In consideration of being permitted to participate in the activities of SPB55 in any manner, including but not limited to playing, practicing, coaching, spectating or being on the field or in spectator areas for any purpose whatsoever, and fully understanding that participation in the game of baseball includes the risk of serious personal injury, the undersigned Player fully and absolutely assumes responsibility for the risk of injury due to participation, weather conditions, playing conditions (including the types of bases, plates, fences and equipment), and other participants, of any magnitude including fatality, and does hereby forever absolutely release, even for their own negligence, and agrees to hold harmless SPB55; all government bodies and landowners that may sanction or permit the participation in the game of baseball; all employees, other participants, agents, servants, officers, public officials, volunteers, game officials and sponsors from all claims for damage whatsoever of any kind now or in the future.

**Limitation of Liability**

The Player participates in SPB55 programs and/or use of any of the SPB55's facilities, services or equipment at his own risk. The Player waives any and all claims, of whatsoever kind or nature, that may arise against SPB55 as a result of the Player's participation in SPB55's recreational baseball program. The Player also acknowledges recognition of SPB55 rules and any deviation of "helmet" requirements (i.e. that all batters, base coaches and baserunners must wear baseball helmets at all times) is at their own risk. The Player also acknowledges recognition of the fact that neither medical insurance nor liability insurance is inherent with SPB55 membership.

I, the Player, have read this release and understand that it is an absolute release, and I freely and voluntarily accept its terms and understand it is binding upon me, my heirs, spouse in interest and assigns.

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Player's Name (Please Print)

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Player's Signature

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_