



LEAGUE VERIFICATION
NAME:
DATE:
INITIAL:

PLAYER PARTICIPATION CONTRACT

(PLEASE PRINT CLEARLY WHEN FILLING OUT CONTRACT)

Please check one box below if the contracted player below is "NEW" or "EXISTING".

	NEW PLAYER		EXISTING PLAYER
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New players must provide a photo identification copy for proper league verification. A phone number or email must be provided with all other highlighted information.

Player Name: _____ Team: _____

Address: _____ Season: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone #: _____ Date of Birth: _____

E-Mail Address: _____ Drivers License #: _____

I hereby agree and consent to the following parameters as conditions of participation in Berks County M.S.B.L.:

- (A) I will observe all rules of the BCMSBL, as established by the Board of Directors, at all times.
- (B) I understand that fighting; physical abuse of players, umpires or spectators; smoking on or around the vicinity of the field; use of alcoholic beverages or drugs; the use of abusive/offensive language toward players, umpires or spectators will not be tolerated by the BCMSBL and violation of this rule could result in my suspension or banishment from the League and forfeiture of all fees paid.
- (C) I certify that I will be turning 27 years of age in the current year to the signing of this contract.
- (D) I realize that the total responsibility for any injury, accident, illness or death to me while participating in any BCMSBL activity, game, practice or function, including but not limited to any mandated or scheduled League functions, are solely mine. I further realize that any costs incurred for any of these reasons are mine.
- (E) Additional fees may be in place per managers for the Reading Phillies Stadium post season rental. All players/teams are responsible to make contributions in order to participate in the post season.

By signing this Agreement, I release the BCMSBL from any liabilities or costs.
I fully agree that the terms and conditions of this Agreement are valid and binding.

PLAYER'S SIGNATURE

DATE

MANAGER'S SIGNATURE

DATE