

NABA - AFFILIATE CONTRACT

I participate as a (check one) ☐ Player ☐ Coach ☐ Manager and hereby consent and agree to the following parameters and conditions of participation in the league as set forth below which is an independently owned and operated league (the "Local League") which is affiliated with, but separate from, the National Adult Baseball Association, Inc. (NABA):

1. I will abide by the rules of the Local League and the NABA (collectively referred to as the "Leagues") as published and further understand the Leagues reserve the right to make changes in the rules without prior notification. I understand the Leagues, in their sole discretion, reserves the right to refuse any player or team permission to play at any time and without prior notice. I understand that fighting, physical abuse of players, umpires, or spectators, or abusive language directed at players, umpires, or spectators is not tolerated by the Local League or NABA.
2. I will not possess or consume any alcoholic beverages or drugs at any time on the playing field, in the dugouts, bleachers, or other areas near or around the playing field, or within one hundred (100) yards of the playing field facility, including, but not limited to, the parking lots of any high school, college or city/county recreation facility.
3. I certify that I am at least 18 years old (28 yrs old within the calendar year for 28&Over, 38 yrs old within the calendar year for 38&Over, 48 yrs old within the calendar year for 48&Over) at the time of my execution of this Contract and understand that I must be able to identify myself with a driver's license/photo ID at any officially scheduled game upon request, or I will be ineligible to continue in the game. Any substitute for me will enter the game under the rules governing player ejection. I understand that violation of any part of this Contract may result in disciplinary action against myself or my team, including, but not limited to, forfeiture of games, suspension from play, fines, or permanent expulsion from the Leagues. I understand that no refund of my share of the team fee or the add-on fee will be due me for any unplayed games for any reason. The terms/provision of this Contract shall be binding upon and shall inure to the benefit of the parties hereto and their respective heirs, successors and assigns.
4. I realize that the total responsibility of any personal injury, accident, illness, disability or death to me or my person while I am participating in any Local League or NABA function, including, but not limited to, any Local League or NABA mandated or scheduled function, is solely mine. I understand that the Local League or the NABA provides only secondary medical insurance; and property damage and liability insurance. I realize that I am responsible for the first \$500.00 on any property damage or liability claim that may arise due to my actions.
5. As a Manager of the team set forth below I hereby acknowledge that I have read the Manager's Rulebook & Guidelines (Rulebook) provided to me by the Leagues, that I have advised my team of the rules therein and my team understands that they will be held responsible for any violations of these rules. I further agree that it is my responsibility to collect the team fee and turn it over to the Local League before the start of the season. I am eligible to play as a player in any regularly scheduled game. I further understand that I must maintain a player contract for each player playing on my team, and accept liability for those players playing who I do not get to complete a contract. I agree that I will submit this Contract to the Leagues prior to any draft and state that I am drafting players for the sole purpose of playing in an Local League and not for the purpose of entering them in another league within this calendar year. I hereby agree to be personally liable to the Local League and the NABA, in the amount of \$150.00 per player, for each and every player which I direct to another league by my actions or by the actions of those under my control or whom are acting on my behalf.
6. Any action/adjudication, as pertaining to the NABA, shall be under the laws of the State of Colorado and all parties agree to submit to the exclusive jurisdiction of the Courts of the City and County of Denver, State of Colorado and that this Agreement shall be interpreted under the laws of the State of Colorado without regard to the principals of conflict of law.

ASSUMPTION AND ACKNOWLEDGEMENT OF RISKS AND RELEASE OF LIABILITY AGREEMENT

In consideration of being allowed to participate in any way for the National Adult Baseball Association; it's tournaments; it's affiliated leagues; it's related events and activities, the undersigned acknowledges, appreciates, and agrees that: 1) The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and, 2) **I knowingly and freely assume all such risks**, both known and unknown, **even if arising from the negligence of the releasees** or others and assume full responsibility for my participation; and, 3) I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and) I, myself and on behalf of my heirs, assigns, personal representatives and next of kin, **hereby release and hold harmless** the National Adult Baseball Association, their officers, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("releasees"), **with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise**, to the fullest extent permitted by law. **I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.**

* _____ *
Player's Signature Date Signed Manager's Signature as Witness Date Signed

*By placing your signature above, you are hereby agreeing to all terms and conditions as set forth above and in any attachments to same (all of which are included by reference) and become part of this agreement. You further acknowledge to have read and agree to all terms and conditions herein, understand them and certify that all player information provided is accurate and shall be updated within 15 days of any changes.

EACH SECTION BELOW MUST BE COMPLETE - PLEASE PRINT BLOCK LETTERS/NUMBERS

First Name										Last Name																			
<input type="text"/>										<input type="text"/>																			
Street Address										Apt No.																			
<input type="text"/>										<input type="text"/>																			
City										State										Zip Code									
<input type="text"/>										<input type="text"/>										<input type="text"/>									
Home Phone										Date of Birth										Social Security Number									
<input type="text"/>										<input type="text"/>										<input type="text"/>									
Work Phone										E-Mail Address																			
<input type="text"/>										<input type="text"/>																			
League Name										Team Name																			
<input type="text"/>										<input type="text"/>																			
Division (Check one)										Season (Check One)																			
<input type="checkbox"/> 18AAA <input type="checkbox"/> 18AA <input type="checkbox"/> 18A <input type="checkbox"/> 18R <input type="checkbox"/> 28AA <input type="checkbox"/> 28A <input type="checkbox"/> 28R <input type="checkbox"/> 38AA <input type="checkbox"/> 38A <input type="checkbox"/> 38R <input type="checkbox"/> 48A <input type="checkbox"/> 48R <input type="checkbox"/> 58R										<input type="checkbox"/> Spring <input type="checkbox"/> Fall																			

PLEASE FILL IN THE APPROPRIATE RESPONSES. ALL INFORMATION PROVIDED IS USED SOLELY BY THE NABA FOR MARKETING AND WILL NOT BE SOLD/RELEASED TO OUTSIDE AGENCIES

A. Marital Status:

- ☐ Single
☐ Married
☐ Divorced
☐ Separated
☐ Widowed

B. Primary residence; do you:

- ☐ Own a house?
☐ Own a townhouse/condo?
☐ Rent an apartment?
☐ Rent a house?

C. Age of children living at home:

- ☐ None
☐ 1-5
☐ 6-10
☐ 11-14
☐ 15-18
☐ 19+

D. Occupation:

- | | | |
|--------------------------------------|--------------------------|--------------------------|
| Professional/Technical | You | Spouse |
| Upper Management/Executive | <input type="checkbox"/> | <input type="checkbox"/> |
| Middle Management | <input type="checkbox"/> | <input type="checkbox"/> |
| Sales/Marketing | <input type="checkbox"/> | <input type="checkbox"/> |
| Clerical or Service Worker | <input type="checkbox"/> | <input type="checkbox"/> |
| Tradesman/Machine Oper/Laborer | <input type="checkbox"/> | <input type="checkbox"/> |
| Self Employed/Business Owner | <input type="checkbox"/> | <input type="checkbox"/> |
| Homemaker | <input type="checkbox"/> | <input type="checkbox"/> |
| Retired | <input type="checkbox"/> | <input type="checkbox"/> |
| Student | <input type="checkbox"/> | <input type="checkbox"/> |

E. Annual family income?

- ☐ Under \$15,000
☐ \$15,000 - \$24,999
☐ \$25,000 - \$34,999
☐ \$35,000 - \$44,999
☐ \$45,000 - \$54,999
☐ \$55,000 - \$64,999
☐ \$65,000 - \$69,999
☐ \$70,000 - \$74,999
☐ \$75,000 - \$99,999
☐ \$100,000 & Over

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