

S.S.I.D.L. and Spano Dome™ Liability Release



Team Name: _____

If for player: **PLAYER NAME:** _____

If for coach: **COACH NAME:** _____

I, _____, release the SSIDL (Charles Short and Heirs and associates), the Spano Dome™ (Frank Spano and heirs and associates), of all liability including but not limited to physical and mental liabilities. I also realize that fastpitch softball can be very dangerous and could lead to serious injury and in remote cases death.
(Print Name of Parent of Player or Coach)

It is understood that each player and coach is liable for their own insurance and, in signing this statement, release the SSIDL (heirs and associates), and Spano Dome (heirs and associates), of all monetary payments to include but not to be exclusive to: emergency room, it's servicers, hospital stays and it's expenses, attorney's fees, rehabilitation expenses and any and all legal, medical and other expenses in regard to any situation rising from any and all issues surrounding and including release the SSIDL and Spano Dome. This also includes travel.

I also understand that I can be removed from the SSIDL and or Spano Dome for unsportsmanlike conduct, immoral activity, unethical play or being in a area not prescribed by the SSIDL or Spano Dome. Further, I understand that parents and fans can and will be expelled from the playing facility and property for the same offenses and including any and all statements negatively affecting any athlete or non-athlete participating or in attendance during the season.

My Insurance Company Name Is: _____ Policy Number: _____

Family Doctor: _____ Phone: _____

Family Dentist: _____ Phone: _____

Should Injury Occurs, Please Contact: _____ Phone: _____

Medical Conditions Diagnosed: _____

Prescribed Medicines Taken: _____

Player Signature: _____ Date: _____
(Required)

Parent/Legal Guardian Signature: _____ Date: _____
(Required)

Coach/Coordinator Signature: _____ Date: _____
(Required)