M.E.T.S.S. SENIOR SOFTBALL LEAGUE PITCHER LIABILITY INSURANCE WAIVER AND RELEASE FORM

I______, pitcher for the ______, have chosen not to wear a protective mask while participating in any and all pitching activity before or during all scheduled games of the Morris Essex Tuesday Senior Softball League. In doing so, I release, waive, discharge, and agree not to sue administrators, directors, agents, coaches, managers, and other representatives of the League, other participants, sponsoring agencies, sponsors, and leasers of premises and fields used to conduct softball games, all of which are hereinafter referred to as "releases", from demands, losses, or damages on account of injury, including death. In addition, I agree to hold harmless the Morris Essex Tuesday Senior Softball League (M.E.T.S.S.), it sponsors, administrators, managers, other players, all communities and their representative- harmless of any responsibilities, financial or otherwise, due to any injury received while pitching and playing, or participating in any league or association activity. I assume all responsibility for personal injury and liability as stated above.

PRINT NAME_____

SIGNATURE:_____

DATE: