



FALL 2013 - League office requires original

AAD/USSSA COMPETITIVE LEAGUE PLAYER/PARENT AGREEMENT AND CONTRACT

(Form to be photocopied and the original submitted to the league office, for each player)

I, _____, PLAYER, and _____ PARENT have been informed of the Rules of Play, Policies and Procedures and Code of Conduct concerning the upcoming 20__ Spring / Fall (circle one) USSSA competitive league season and are committing to the _____ team.

PLAYER -

By signing this agreement I understand and agree to the following:

1. I am entering into a **COMPETITIVE** program, with no guarantees made, by AAD/USSSA, with respect to playing time or playing position on the team with which I have committed to.
2. If I **voluntarily** quit the above team I will not be eligible to play, on any age league team, during the current league season, unless released by the manager of the team AND a waiver is granted by AAD/USSSA.
3. I have been provided a copy of the Leagues Policies and Code of Conduct and agree to abide by all provisions.

Player Signature: _____

(We realize a minors signature is not binding - this if for clarification purposes only)

PARENT -

As a parent / guardian, I agree with the above, (for my child), and further more agree to the following:

1. There will be **NO** individual refunds from the league. All payments or refunds are subject to agreements between the management of the team and the parents involved. AAD/USSSA highly recommends that you obtain documentation of fees charged by the management of the team and the terms of payment and / or refunds. I understand that any documented, individual player debts to this team or any AAD/USSSA vendor or partner must be paid prior to being released from this team regardless of the season associated with this agreement.
2. Parents or participants are **not** to receive any compensation, direct or indirect, for playing with this team, nor will a "buy out" provision be allowed and no monetary value can be placed on the Player/Parent Agreements. Scholarships, specific to the costs associated with direct participation in the program and provided by the team, are acceptable.
3. Players are **not** permitted to play on more than one team in the same league age division. This includes single year age divisions that are combined into one league program. If a player is approved to play on teams, in different age divisions, this agreement must be secured (for each team) prior to the start of this league season.
4. The officers, contractors, and volunteers of AAD/USSSA **do not** screen or interview the managers, coaches, or volunteers of the teams in this program. As a parent I understand that it is my responsibility to screen and interview anyone that is associated with the operation of this team.
5. I have read the Player / Parent Handbook posted in the local web site (www.abqusssa.com) and I understand that AAD/USSSA **does not** set coaching or team policies except those specifically covered by the League Policies, Code of Conduct and this agreement. It is my responsibility to ensure the team, its philosophies and its management is a good fit for my child.
6. I have been provided a copy of the League Policies and Code of Conduct and agree to abide by all provisions. I am also aware that I (and the player above) can be removed from the league for failure to comply with these policies and Code of Conduct.
7. I agree to always follow the rules of the game and the policies of not only the facilities used, but of AAD/USSSA, NM USSSA, National USSSA and its directors and umpires. I will not instigate or participate in activity that would compromise me, my child, managers, coaches, league/tournament officials, or any other associates of this program.

In consideration of acceptance of this contract and permission to play with the stated team, I hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the stated team, AAD/USSSA, facilities used for play and any other member associations for any and all injuries suffered by myself or my child in games or practices for the team which this contract is signed.

Parent / Guardian Signature: _____

Dated: _____ 20__ , at _____ am/pm

Address of Parent or Guardian _____

Email of Parent or Guardian _____