

IRVING GIRLS SOFTBALL LEAGUE, INC.

Parent/Guardian and Player Contract

I/We, as parent(s) or guardian(s) desire and give permission for my/our player _____ to engage in the softball program of the Irving Girls Softball League Inc. (IGSL). I, intending to be legally bound, hereby for myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I have against all other entrants and against the Irving Girls Softball League, Inc., Irving, Texas, it's officers, agents and representatives for any and all injuries suffered by my player, while participating in the I.G.S.L., Inc. program, or while in transit to and from practice or while in transit to and from participation in match/tournament games or other team/ IGSL activities.

We, (heretofore to mean parent(s)/guardian(s) and player), agree for our player to play for the _____ for the calendar year 2024, in the _____ Division. We understand we are to be knowledgeable of, subject to and will abide by the Bylaws, Rules and Regulations of the IGSL and any team rules as set by the Team Manager or be subject disciplinary measures, including suspension or ejection from the team and/or IGSL.

We agree to conduct/ourselves in a sportsmanlike manner at all times while involved with the League, team activities, and tournaments, etc., which will bring credit to our team and organization. We understand that our conduct can be cause for our SUSPENSION from the team and league.

We understand that the Team Manager is the sole authority of the team and responsible to the IGSL and its Board of Directors, for all aspects of the team and its affairs. This includes any team funds and, the actions of its coaches, players, parents and spectators while involved in any team or league activities.

We also understand that the use of PROFANITY, ALCOHOL and NARCOTICS of any type, kind, sort or in any manner other than a proven doctor's prescription, at any time while involved as a participant or spectator in any team or IGSL activity, is grounds for IMMEDIATE DISMISSAL from the team and I.G.S.L., Inc., as is any type of PHYSICAL CONTACT TOWARDS any other Teammate, Player, Manager, Coach, Spectator, Umpire, Scorekeeper or Agent of the I.G.S.L., Inc.

It is also agreed that no action will be taken against the League or any of it' agents in the event of suspension for an infraction of the rules and regulations set forth in the Bylaws for the government of the League, other than to file a written protest to the Board of Directors for their determination of the suspension action.

We understand that this contract also serves as the IGSL membership application. Limited to two (2), each parent or guardian signing below are eligible for membership in the League, and as such can participate as a member as set forth in the Bylaws.

We also understand that the Managers, Coaches, Officers and Agents of the I.G.S.L., Inc. are strictly voluntary positions and that we will assist them in obtaining a successful organization and team. Signing this contract will be deemed your consent allowing the I.G.S.L. to use your player's likeness/image for purposes of publication, exhibition and public display in promoting the I.G.S.L and its mission.

_____ Signature of Parent(s)/Guardian(s)		_____ Address	
_____ Email	_____ Phone- please circle (home/cell/work)		_____ Player Signature

The person presenting this form has our authority to secure immediate medical services that our child needs to care for her injuries by private Doctor or Hospital Emergency aid. This person is not responsible for payment of this service or in any other way.

_____ Child's age	_____ Date of Birth	_____ Date of last Tetanus shot	_____ can/cannot take Aspirin	_____ Known Allergies
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Father's Phone#: _____ Mother's Phone #: _____

-----**For League Use Only**-----

In consideration of the executed contract with, _____, and duly executed consent of her parent/guardian, with the payment of fee, she is hereby accepted as a Player in the I.G.S.L., Inc. this ____ day of _____, 2024.

Team: _____ Team Manager: _____

Division V.P. Signature: _____ Date Approved: _____