## **MMBL 2025 COLLEGE PLAYERS REGISTRATION**

- PLEASE WRITE LEGIBLY -

PLAYERS NAME \_\_\_\_\_\_ PARENTS NAME \_\_\_\_\_

Home Street Address			
City	State Z	ip Code	
Player's E-mail	Parent's E-mail		
Player's Cell Phone	Home Phone Number		
Emergency Contact's Name	Phone		
PLAYER'S: Date of Birth	Age Jersey Size	Bat Size (inches)	
POSITION: Primary Position	Secondary Position		
PLAYER PRO	FILE - ALL INFORMATION REQUIRE	.D	
This Section for Graduating High Sc	nool Seniors This Section for Curr	ent College Players	
Bats: R / L Throws: R / L Height W	eightBats: R / L Throws: R / L Height _	Weight	
High School Attended			
Graduation Year	Year in School (Spring 2025)		
Name of High School Coach			
High School Coach's E-mail	Name of College Coach		
	College Coach's E-mail		
College Planning to Attend	Fligibility: On College Team Roster?	(check one)	
Year in School (Spring 2025)	Yes No Red-Shirte	ed.	
Name of College Coach	If No, why?	· · ·	
College Coach's E-mail			
Eligibility: Signed National Letter of Intent? (check of			
☐ Yes ☐ No, preferred walk-on ☐ No, walkin	g on		
If you played on a Metro Team in 2023, what w If you are a new player to the MMBL, we will p COST A THE MMBL HAS 6 TEAMS WITH	ND REGISTRATION DEADLINE AN 18-MAN PER TEAM ROSTER. ROSTER SPOTS tration deadline is Sunday, May 4, 2025.	S ARE LIMITED.	
**Fee reduction is strictly for	primary pitchers who do not bat or play an	other position.	
	ve basis. Once all spots are filled, a wait-list will be y May 4, 2025 will need to pay \$500 for Position Pla		
PAY BY CHECK: PLAYER RESPONSIBILITIES:			
Please make checks payable to MMBL  MAIL TO:	Participate in all practices and games for your team unless you obtain prior consent from coach		
MMBL +	Provide your own transportation to and from games.	wn transportation to and from games.	
830 Brookwood Drive, Wetumpka, Alabama 36093	<ul> <li>MMBL expects each player to maintain impeccable moral standards, abide by NCAA guidelines, and be a role model in our community.</li> </ul>		
By signing below, I agree to my responsibilities and term	outlined above. I agree to pay the league fee of \$475.00 if I a	am a position plaver or \$375.00 if	

am a pitcher only. I understand that 1/2 player's fees refunds are only issued for an injury substantiated by a doctor.

Date:

Player's Signature:

## Montgomery Metro Baseball League General Release and Indemnification Agreement

PLEASE READ THIS DOCUMENT CAREFULLY BEFORE SIGNING. THIS IS A LEGALLY BINDING DOCUMENT. THIS FULLY SIGNED FORM MUST BE SUBMITTED BY A PARENT OR LEGAL GUARDIAN BEFORE ANY PLAYER IS ALLOWED TO PARTICIPATE IN THE MONTGOMERY METRO BASEBALL LEAGUE.

I, the undersigned, wish for my Child (hereafter "Child") to participate in the above referenced league (hereafter "league") on the date(s) and location indicated above and, in consideration for my Child's participation, I hereby agree as follows:

I acknowledge, understand and appreciate that as part of my Child's participation in the MMBL there are dangers, hazards and inherent risks to which my Child may be exposed, including the risk of serious physical injury, temporary or permanent disability, and death, as well as economic and property loss. I further realize that participating in the MMBL may involve risks and dangers, both known and unknown, and have elected to allow my Child to take part in the MMBL. Therefore I, on behalf of my Child, voluntarily accept and assume all risk of injury, loss of life or damage to property arising out of training, preparing, participating and traveling to or from the MMBL.

I, on behalf of my Child, hereby release the **Montgomery Metro Baseball League**, its Board of Trustees, Administration, Faculty, Staff, Student Leaders, the Conference Services Office, the **MMBL** coaching Staff, and all other officers, directors, employees and agents (hereafter "**MMBL**") from any and all liability as to any right of action that may accrue to my heirs or representatives for any injury to my Child or loss that my Child may suffer while training, preparing, participating and/or traveling to or from the games. This agreement is binding on my heirs and assigns.

I, on behalf of my Child, furthermore release, indemnify and hold harmless **MMBL** from and against any and all liability, actions, debts, claims and demands of every kind whatsoever, specifically including, but not limited to, any claim for negligence or negligent acts or omissions and any present or future claim, loss or liability for injury to person or property that my Child may suffer, for which my Child may be liable to any other person, that may or does arise out of my Child's participation in the **MMBL**. I understand that the **MMBL** accepts no responsibility for my Child's personal property.

In the event of an accident or serious illness, I hereby authorize representatives of **MMBL** to obtain medical treatment for my Child on my behalf. I hereby hold harmless and agree to indemnify **MMBL** from any claims, causes of action, damages and/or liabilities, arising out of or resulting from said medical treatment. I further agree to accept full responsibility for any and all expenses, including medical expenses that may derive from any injuries to my Child that may occur during his/her participation in the **MMBL**.

This RELEASE shall be governed by and construed under the laws of Alabama. I agree that any legal action or proceeding relating to this RELEASE, or arising out of any injury, death, damage or loss as a result of my Child's participation in any part of the **MMBL**, shall be brought only in Montgomery County, Alabama.

This RELEASE contains the entire agreement between the parties to this agreement and the terms of this RELEASE are contractual and not a mere recital. The information I have provided is disclosed accurately and truthfully. I have been given ample opportunity to read this document and I understand and agree to all of its terms and conditions. I understand that I am giving up substantial rights (including my right to sue), and acknowledge that I am signing this document freely and voluntarily, and intend by my signature to provide a complete and unconditional release of all liability to the greatest extent allowed by law. My signature on this document is intended to bind not only myself and my Child but also the successors, heirs, representatives, administrators, and assigns of myself and my Child.

A PARENT OR GUARDIAN MUST SIGN THIS FORM FOR A MINOR UNDER THE AGE OF 19

Participant Name	
Participant Signature	Date
Parent Name	
Parent Signature	Date