LOS ANGELES DEPARTMENT OF RECREATION AND PARKS MUNICIPAL SPORTS BASEBALL/SOFTBALL SCORE CARD PRINT UMPIRE NAME MAIL TO: Valley Sports Office, 6911 Laurelgrove Av., No. Hollywood CA 91605 * = Unacceptable Conduct Date League No. **P** = Profanity **VISITOR HOME** CONDUCT Where Played _____ + = Players with Alcohol/Smoking CONDUCT Alcohol/Smoking Fans V H Starting Time _ (R)= Player Roster/I.D. Check Time Consumed WRITE COMMENTS ON BACK INNINGS 11 **FINAL SCORE** 5 6 9 10 Visiting Team Home Team **RELEASE AND WAIVER** All participants are required to assume all risk by signing this general release. I understand that the risks I assume by participating in the Municipal Sports Program include, but are not limited to serious head and other bodily injuries. In consideration of receiving permission to participate in the Municipal Sports Program, I hereby release the City of Los Angeles, and all of its officers and employees from all liability for any personal injury, death or damage of any kind arising from or related to my participation in the Municipal Sports Program. No oral representations, statements or inducements apart from this written waiver have been made. My decision to participate in the Municipal Sports Program is voluntarily assuming all risk or loss, damage, or injury including death that may occur through my participation in the Municipal Sports Program. I understand that by signing this release and waiver, I am giving up the right for myself and/or my family or heirs to sue the City of Los Angeles, and its officers and employees for injuries resulting from participation in the Municipal Sports Program. I agree to abide by all RULES and REGULATIONS governing Municipal Sports - which includes any disciplinary measures, fines or suspensions levied by the MUNICIPAL SPORTS EXECUTIVE COMMITTEE. I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER. RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM. **HOME NAME:** VISITOR NAME: PRINT NAME **SIGNATURE PRINT NAME SIGNATURE MANAGER** MANAGER **Field Conditions** GOOD AVG. POOR AMT PAID \$ AMT PAID \$ **PAYEE INTL PAYEE INTL** DRAG **BACKSTOP** No. in Batting Order: ___ No. in Batting Order: FENCING

HOMEPLATE

LIGHTS OUT?

N / Y Explain on back

BASES

LINES

BALL \square

No. Bats Checked:

Rejected:

BALL \square

No. Bats Checked: _____

Rejected: