**The Blue Mountain League, Inc.** \_\_\_\_\_\_Approved

**Player Contract** \_\_\_\_\_\_Disproved

(explanation on back)

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to play baseball during the 2025 season with the\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the Blue Mountain League, Inc., baseball league. The term of this contract shall be until the final game of the last championship or post-season series game. I further agree that I will abide by the League’s constitution and By-Laws and that I will abide by the terms of this contract. A copy of the League’s constitution and By-Laws will be provided to me upon written or emailed request.

I UNDERSTAND THAT I MAY NOT RECEIVE RENUMERATION OF ANY NATURE WHATSOEVER FOR MY MEMBERSHIP ON THIS TEAM, NOR FOR PARTICIPATING IN ANY LEAGUE GAME. I FURTHER UNDERSTAND THAT VIOLATION OF THIS PARAGRAPH SHALL CAUSE ME TO BE CONSIDERED A PROESSIONAL BASEBALL PLAYER BY THE LEAGUE, THUS RESULTING IN MY EXPULSION FROM THE LEAGUE.

I understand that this contract will not be approved by the League President, nor shall I be eligible in the League, if:

1. I have an outstanding obligation (uniform, League raffle ticket money, etc.) to another League team.
2. I have not reached my eighteenth birthday (18th) prior to the start of the League season, and this contract has not been signed by a parent as well as by me.
3. I am a former professional baseball player and have NOT provided proof of my eligibility to compete in the League (Proof is a release or a placement on a voluntary retired list, NCAA certification of eligibility, or such information or documents as would establish my eligibility).
4. I do not reside within League boundaries, nor I am enrolled full or part time or in summer classes at a college within League boundaries.

I understand that if I have signed contracts with more than one League team, I must notify the League president for which team I desire to play. I realize that I should not be eligible to play until chosen team has played five (5) official games.

I understand that if I request my release from this contract, I may not become eligible to play for another League team until June 15 of this season. If this team refuses to grant my release, I have the right to appeal to the League’s Baseball Committee to determine whether or not I should receive my release. This request must be made in writing or email to any League officer within five (5) days of the team’s refusal to grant the release.

I understand that I may have the right to appeal any disciplinary action imposed upon me by the League. In the event that I desire to appeal such action, I must do so by notifying in writing or email any League officer within five (5) days of the action taken against me.

I agree to return all equipment and uniforms furnished to me by this team upon request or when I may decide to change teams through proper channels. I further agree that I shall not be eligible to compete in the League until all prior obligations to this team, of any nature whatsoever as classified by League By-Laws, are satisfied.

I further understand that the Blue Mountain League does not carry or offer supplemental medical coverage as part of its insurance coverage plan.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Please initial here** (player and parent, if applicable)

IN WITNESS WHEREOF, intending to be legally bound, hereby, I have affixed my signature to this contract.

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLAYER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MANAGER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if player is under eighteen years of age)

PHONE/CELL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_