



**SOUTH FLORIDA COLLEGIATE LEAGUE
2021 LETTER OF COMMITMENT**

SFCBL TEAM: FLORIDA POKERS BASEBALL

NAME: _____ PLAYER CELL PHONE: _____

DATE OF BIRTH: _____ CLASS IN FALL 2021: _____

ADDRESS: _____

PARENT EMAIL: _____

CURRENT COLLEGE: _____

I understand that by signing this document to the above team and to the South Florida Collegiate Baseball League. I am also committed to abiding by the specific league's and team's code of conduct manual and their rules and regulations. I have not signed, and will not sign, any other commitment form for the designated season. Signing this document prohibits me from participating on any other summer league team. I may participate on other outside teams only according to team and league regulations.

I understand that this is a direct offer of the team to fill a place on its team roster in accordance with these rules of the league. I fully understand that I may be released from this letter of commitment only in the event of my signing a professional contract; being selected to an active traveling all-star team sanctioned by or sponsored by the NCAA, NJCAA, NAIA, and the U.S. Olympic Committee or any of its subordinate committees, or similar amateur athletics authority; or by written mutual consent of the commissioner of both involved leagues. I understand that I may be released from this commitment by the team and/or league specified above if I am deemed injured and unable to perform. I understand that the full player fee must be submitted prior to January 15, with a deposit of \$400 due at time of signing this contract. I am fully aware that refunds, of the player fee, will only be issued due to an injury making it impossible for me to play, with documentation submitted prior to May 1.

I understand that this letter of commitment is not valid until each requested signature is obtained.

PLAYERS SIGNATURE & DATE:

TEAM/LEAGUE'S SIGNATURE & DATE:
