



Participant Release & Waiver of Liability

Participant Info

Participant Name: _____

Address: _____

City: _____

Postal Code: _____

Telephone: _____

Email: _____

Date of Birth: _____
DD/MM/YY

Parent/Emergency Contact Information

Name/Relationship: _____

Telephone: _____

Name/Relationship: _____

Telephone: _____

Medical History

Do you have, or have you had, any of the following?

Medical Conditions: _____

Allergies: _____

Injuries: _____

Surgeries: _____

Any Other Issues
Staff/Medical
Responders Should
Be Aware Of: _____

PLEASE COMPLETE BACKSIDE OF FORM ---->



Participant Name: _____

PLEASE READ CAREFULLY - BY SIGNING BELOW YOU FORFEIT CERTAIN LEGAL RIGHTS

The Participant named above wishes to take part in sport training and/or exercise program(s) offered by or at The Yardhouse Baseball Inc. ("The Yardhouse") in full knowledge and understanding that such participation, whether by a coach, trainer, player or other, **INVOLVES RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY AND DEATH, AND OTHER SOCIAL AND ECONOMIC LOSSES** which may be caused by the Participant's own actions or inactions, the actions or inactions of others, the condition of the facility and/or equipment, or **NEGLIGENCE BY ANY PARTY.**

In consideration of being permitted to partake in any activity at The Yardhouse, the undersigned Participant, or his or her legal guardian in the case of a minor:

1. Asserts that he/she is in good physical condition and able to participate in athletic development programs and other activities including, but not limited to, physical strain and exertion.
2. Agrees to use safety equipment, comply with The Yardhouse rules and instructions, and act prudently at all times.
3. Certifies that he/she, either personally or through his/her sports league, association, or other means, has adequate insurance coverage with respect to any and all possible losses, claims, injuries, liability, damage, or other insurable event that could occur in connection with his/her participation in any activity at The Yardhouse.
4. Authorizes The Yardhouse staff, coaches, and healthcare practitioners to share and exchange the Participant's personal information regarding, but not limited to, injuries, skill development and contact information.
5. Voluntarily assumes all risks associated with participation and all responsibility for losses, costs and damages incurred as a result of it.
6. And, intending to be legally bound personally and for his/her heirs, executors and administrators, Participant waives and releases all rights and claims for damages he/she might accrue against The Yardhouse or its owners, principals, officers, employees, agents, trainers or instructors, and any successors, representatives and assigns of the foregoing, for any and all injuries suffered by Participant or damage to Participant's property, while participating in (or traveling to or from) any activity conducted at The Yardhouse.

By **NOT** checking this box, the Participant authorizes The Yardhouse to use photographs taken while on the premises or at The Yardhouse events for use in editorial and/or promotional material produced and/or published by The Yardhouse. I understand that there will be no compensation or remuneration for the use of the photo.

I hereby affirm that I have read this Liability Waiver and Release and that I fully understand its contents.

Signature: _____
(of Parental Guardian if under 18 years of age)

Date: _____

Printed Name: _____

Email: _____

Witness: _____

Printed Name: _____