

PLUMSTEAD BASEBALL ASSOCIATION

ASSUMPTION OF RISK, WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT

As the parent or legal guardian of

_____ (name of participant)
_____ (name of participant)
_____ (name of participant)
_____ (name of participant)

participating in Plumstead Baseball Association baseball programs, I understand and acknowledge that all sports activities, including those offered through Plumstead Baseball Association (“Plumstead Baseball”), involve risk of personal injury and even death, and that people who have or have had injuries in past, whether sports related or not, may be at an increased risk of future injury.

I acknowledge that it is solely my responsibility as parent or legal guardian to determine, based on my child’s age, health, physical condition and level of athletic experience, what activities are appropriate for him/her, and that it is solely my responsibility to restrict my child’s activities to those which are appropriate for him/her.

As a condition of my child’s participation in the activities offered by Plumstead Baseball, I expressly assume, to the extent allowed by law, any and all risks of injury or death arising from/or relating to my child’s activities with Plumstead Baseball and I waive and release any and all actions, claims, suits or demands of any kind or nature whatsoever against the organization, its officers, agents, sponsors, volunteers or representatives, arising from or relating in any way to my child’s participation in the activities offered by Plumstead Baseball. I understand that this Assumption of Risk, Waiver, Release and Indemnification Agreement means, among other things, that if my child is injured or dies as a result of their participation in any of the activities offered with Plumstead Baseball, I and/or my family or heirs cannot under any circumstances sue Plumstead Baseball, its directors, officers, agents, sponsors, volunteers or representatives for damages related to or caused by my child’s injuries or death.

I agree to indemnify Plumstead Baseball, its directors, officers, agents, sponsors, volunteers or representatives, and their subrogates, if any, in the event of any loss, damage or claim against any of them arising from or relating in any way to my child’s participation in any of the activities offered by Plumstead Baseball.

I understand and acknowledge that my child would not have been permitted to participate in any of the activities offered by Plumstead Baseball had I not executed this Assumption of Risk, Waiver, Release and Indemnification Agreement.

I have read this Assumption of Risk, Waiver, Release and Indemnification Agreement, have asked and received answers to any questions I had concerning

its meaning, and I execute it freely, with a full complete understanding of its legal effect, and of the fact that it affects my legal rights.

FOR PARTICIPANTS UNDER THE AGE OF EIGHTEEN

I am the **parent** or **legal guardian** of the child (children) whose name(s) appear above and below. I have read and understand this Assumption of Risk, Waiver, Release and Indemnification Agreement, and consent, on behalf of the child named here,

_____ (name of participant)

_____ (name of participant)

_____ (name of participant)

_____ (name of participant), to its terms.

Date

Signature of Parent/Legal Guardian

Printed Name of Parent/Legal Guardian

FOR PARTICIPANTS OVER THE AGE OF EIGHTEEN

Printed name

Signature

Date