

**PARENTAL WAIVER RELEASE OF LIABILITY,
INDEMNIFICATION AND CONSENT FORM**

I, the undersigned, as parent of legal guardian of the child named below, do hereby give my full consent and approval for my child to participate as a member of the Viper Academy Baseball program as indicated below.

I understand that there are certain risks of dangers and injuries, including death, inherent in the practice and play of baseball as well as traveling and other related activities incidental of my child's participation, and I am willing to assume these risks on behalf of my child. These risks include but are not limited to, those hazards associated with weather conditions, travel, and equipment.

I understand that the very nature of the game of baseball is hazardous and risky, including but not limited to the acts of pitching, throwing, fielding, and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving and collisions with other players and objects, all of which can cause serious injury or death to my child and to other players.

Further, I agree that in consideration for the right to allow my child to participate as a member of the Viper Academy Baseball Program designated below and in consideration for permission to play on the fields at any Viper Academy Baseball site location, or any other field arranged for by the Viper Academy Baseball.

1. On behalf of myself and my child I do voluntarily elect to accept and solely assume all risk of injuries incurred or suffered by my child (a) as practicing or playing as a member of the Viper Academy Baseball Program, (b) while serving in a non-playing capacity as a participant or observer during practice or play by other teams or by other participants and (c) while on or upon or traveling to or from the premises on any and all of the fields arranged for by the Viper Academy Baseball for practice or play.

2. In addition to giving my full consent for my child's participation, I do hereby waive, release, discharge and agree not to hold the Viper Academy Baseball, the owner or operator on any field on which baseball is practiced or played, or the owners, officials, agents, servants, associations, employers, or any person or entity connected with the Viper Academy Baseball organization for any harm, damages, or costs, including attorney fees, or causes of action which I or my child have or may have in the future as a result of damages, injuries, including death, sustained or incurred by my child for whatever cause including but not limited to negligence, breach of contract, or wrongful conduct of the parties hereby released.

3. I hereby certify that my child is fully capable of participating in the designated sport and that my child is healthy and has no physical

or mental disabilities that would restrict full participation in these activities, except as listed below:

4. I further agree on behalf of myself and my child listed below, that I shall hold harmless and fully indemnify the parties hereby released from any and all claims, damages, costs, including attorney fees and causes of action which may arise from any cause made by me or by, through, or on behalf of my child, even if the damages, injuries or death are caused in whole or by part by any of the persons or entities I hereby release.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY, INDEMNIFICATION AGREEMENT AND CONSENT FORM AND AGREE TO ABIDE BY THEM.

Name of Child (Please Print)

Date of Birth Insurance Carrier and Policy Number

Address

City State ZIP

Phone Number in Case of Emergency

Parent/Guardian's Name (Print)

Parent/Guardian's Signature Date _____