Small Photo of player Please fit into the space provided.

California Lightning

Registration Form

Parents this form must be filled out completely

Player(s) Name:				
Age(s):				
Grade(s) & School(s): _				
Parent(s):				
Address:				
City:				
Alt Address:				
City:		State:	Zip:	
Home Phone:		_ Alt Home Phone: _		
Work Phone:		Alt Work Phone:		
Cell Phone:		_ Alt Cell Phone:		
Emergency Contact:		Phone:		
E-mail Address:		E-mail Address: _		
Additional Medical Info	ormation:			



- 1. In consideration for receiving permission to participate on the California Lightning Baseball team or individual lesson(s) I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE, Jay Bayler. Tamalpias High School District, Bacich School or the Kentfield School District, as well as their officers, agents, servants, or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me or my child, or any of the property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in such activity, or while in, on or upon the premises where the activity is being conducted.
- 2. I am fully aware of the unusual risks involved and hazards connected with this activity, including but not limited to travel risks and/or baseball related activities. I hereby elect to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me or my child and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me, my child or any loss or damage of property owned by me or my child, as a result of being engaged in such activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE.
- 3. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to my participation or my child's in said activity, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or otherwise.
- 4. It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of California.
- 6. IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

Signed on this day of, 20	·
PARTICIPANT	
Print Name	Signature
and consents for California Lightning and	8, Parent/Guardian consents to the minor's participation in the event distaff members to seek reasonable and necessary medical treatmen ociated activities, and agrees to be responsible for any and all costs
Parent/Guardian Signature	