

## Insurance Waiver - First Class Pitching

Parent-Guardian Authorization: I/We being the parent or legal guardian or legal guardian of

\_\_\_\_\_, participant of softball instruction, do hereby release and discharge any instructors or staff members or curators of any facilities where instruction is occurring from any and all debts, claims, demands, actions, damages, causes of action, judgments or suits of any kind which may arise as a result of any participation during instruction and hereby agree to have and indemnify and keep harmless the instructors and curators of facilities where instruction is occurring against any and all liability, claims, judgments, or demands for damages arising as a result of any course instruction given the participant.

I/We being the parent or legal guardian authorize any instructor or staff member permission to request emergency medical treatment (of which I will be financially responsible), or care as necessary to insure the well-being of our dependent. Further, I claim that the registrant is in good physical condition and physically able to participate.

HEALTH PLAN (name) \_\_\_\_\_

Identification # \_\_\_\_\_

Parent-Guardian Signature \_\_\_\_\_

Phone number in case of emergency \_\_\_\_\_