

W.S.B.L. WAIVER FORM

DUE Feb 25

MEDICAL RELEASE

I, the parent and/or guardian of the player named below, do hereby give approval for participation in any and all West Suburban Baseball League (WSBL) baseball activities and grant permission to managing personnel or other league representatives to authorize and obtain medical treatment by a qualified and licensed medical physician, hospital or medical clinic of the following minor in the event of injury or medical emergency that occurs while participating in said activities, which, in the opinion of the attending physician, may endanger his life, cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted only when neither parent nor legal guardian is available to grant emergency treatment and only after a reasonable effort has been made to reach me. I assume all risks and hazards incidental to participation, including, but not limited to, transportation to and from activities, and so hereby waive, release, absolve, indemnify and agree to hold harmless the local league organization, West Suburban Baseball League (WSBL), organizers, sponsors, supervisors, managers, coaches, volunteers, and participants, for any claim arising out of any injury to the player. This release form is completed and signed of my own free will with the sole purpose of authorizing medical treatment under emergency circumstance in my absence.

WAIVER

I, the parent and/or guardian of the player named below, do hereby give my permission for him/her to participate in any and all activities of the West Suburban Baseball League program for the upcoming season. I assume full responsibility and assume all risks and hazards incidental to the conduct of the activities including, but not limited to, transportation to and from such activities. I do further hereby agree to release, absolve, indemnify and hold harmless the organizers, sponsors, managers, coaches, and volunteer personally, in any and all cases of personal injury or personal property damage during any of activities sanctioned by the West Suburban Baseball League. It is understood and agreed that all players will abide by all rules and regulations of the West Suburban Baseball League.

In consideration of your accepting the above participant, I hereby, for myself, my offspring, my heirs, executors, and administrators, waive and release any and all rights and claims for any and all damages I or they may have against the West Suburban Baseball League, past or present representatives, successors, and assigns for any and all injuries suffered by myself or the above participant at any activity sponsored or sanctioned by the West Suburban Baseball League. This agreement will remain in effect for one calendar year from the date shown below.

Players full name: _____

Parent/Guardian Signature: _____

Date : _____

Phone _____

Email _____