WARREN ASSOCIATION OF BAPTISTS SPRING 2020 SOFTBALL WAIVER

Church / Team Information			
Name	e of Church / Team:		
C	o-Ed		
Player Information			
Playe	r: <u> </u>	Phone:	
Releas	se of Liability		
	ndersigned player, or personal representative of t	he undersigned player, ac	cknowledge, understand,
1.	There are certain risks and hazards involved in participating in softball and that the risk is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist.		
2.	I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releasees, that being Warren Association of Baptist and its employees, agents, and assigns, or others, and assume full responsibility for my participation.		
3.	I willingly agree to comply with the stated and conflowever, I observe any unusual significant has remove myself from participation and bring such	azard during my presend	ce or participation, I will
4.	I, for myself and on behalf of my heirs, assigned release and hold harmless the Warren Associand/or employees, other participating churches, injury, disability, death, or loss or damage to pertube releasees or otherwise.	iation of Baptists, their of and other participants w	officers, officials, agents, ith respect to any and all
	read this release of liability and assumption of tand that I have given up substantial rights by sigr ment.		
Signature:		Date:	
For Pa	rticipants of Minority Age (Under 18)		
Name of Parent/Guardian:		Relationship to Player:	
Signature:		Date:	