

**Waiver, Release of Liability, Indemnification and Consent Form
(FOR TOURNAMENT USE)**

I, the undersigned, do hereby give my full consent and approval to participate as a member of the softball team and tournament indicated below.

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

I understand that sliding into base is dangerous to myself and other players and may result in serious injury or death.

I understand that the very nature of the game of softball 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 with stationary objects, all of which can cause serious injury or death to myself and to other players.

Further, I agree that in consideration for the right to participate as a member of the team designated below and in consideration for permission to play on the fields arranged for by the team or Waconia Baseball Association:

1. I do voluntarily elect to accept and solely assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as team member or observer during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and all of the fields arranged for by my team or the Waconia Baseball Association for practice or play.

2. In addition to giving my full consent to participate, I do hereby waive, release, discharge and agree not to sue the team and Waconia Baseball Association, the owner or operator of any fields or other entity designated below, the City of Waconia, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, tournament, league, field or Waconia Baseball Association for any claim, damages, costs including attorneys fees, or cause of action which I may have in the future as a result of damages, injuries, including death, sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released.

I hereby certify that I am fully capable of participating in the designated sport and that I am healthy and have no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as made known to coaches and officials of the team and Waconia Baseball Association.

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

