

Champlin Park Fastpitch Association (CPFA)

Waiver of Liability, Proof of Insurance, and Emergency Authorization:

I, the parent/guardian, hereby give my consent for my daughter named on this form to participate in the CPFA Softball program for 2020.

I know that participation in softball and related activities may result in serious injuries or illness and that such injuries or illness may occur even when protective equipment is used and I hereby waive, release, and agree to indemnify and hold harmless CPFA, the organizers, sponsors, supervisors, participants, and agents of CPFA for any claim arising out of an injury to my child whether the result of negligence or for any other cause.

I, the parent/guardian, hereby give permission for the child named on this form to be admitted into a hospital or to be treated by a physician for any injury incurred while playing, being transported to or from, or as a spectator at any activity with CPFA.

By signing your name below, you hereby confirm that you agree to this waiver and have indicated proof of medical insurance.

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____ Date: _____

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Champlin Park Fastpitch Association their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____ Date: _____

Player Information:

Last Name: _____ First Name: _____

Emergency Contact Name: _____ Emergency Contact Number: _____

Medical Insurance Carrier: _____ ID Number: _____

Doctor's Name: _____ Doctor's Phone Number: _____