



La Mirada Pony Baseball (LMBA) Waiver & Liability Release League For Participating Teams/Players

NOTE: THIS FORM MUST BE READ AND SIGNED BEFORE THE LEAGUE IS PERMITTED TO TAKE PART IN ANY LA MIRADA PONY BASEBALL EVENTS, PRACTICES, OR GAMES. BY SIGNING THIS AGREEMENT, THE LEAGUE AND LEAGUE PRESIDENT (_____) AFFIRMS HAVING READ IT.

We, the League (_____) Executive Board Member and President named below and signing on behalf of the teams participating, know that participation in baseball may result in serious injuries and protective equipment does not prevent all injuries to players. I hereby waive, release, absolve, indemnify, and agree to hold harmless, the City of La Mirada, PONY Baseball, Inc., La Mirada PONY Baseball, its directors, coaches, organizers, sponsors and participants for any claim arising out of injury to any team player or team volunteer, whether the result of negligence or any other cause, except to the extent and in the amount covered by accident or liability insurance. Further, I hereby grant permission to the adult manager, coach, trainer or business manager of the team to obtain medical care per the Pony League (_____) , at the Leagues (_____) or parents expense, from any licensed physician, hospital or medical clinic, for the player or the League named herein at such time I cannot be contacted in person or by telephone. The authorization shall include all league activities, including travel to and from all league activities.

In light of the ongoing COVID-19 pandemic, I hereby represent and warrant that participating teams, players, and volunteers do not, and have not, had any symptoms of COVID-19, unless cleared by an accepted FDA test, to my knowledge have not been exposed to anyone with known or suspected COVID-19, unless cleared by an accepted FDA test, have not tested positive for COVID-19, and are not awaiting COVID-19 test results. Participating teams from our league (_____) will be informed and will be required to follow the COVID-19 Exposure Management Plan Guidance for Organized Youth Sports Programs updated April 22, 2022 (http://publichealth.lacounty.gov/media/coronavirus/docs/protocols/ExposureManagementPlan_YouthSports.pdf).

I have read this Release of Liability and Waiver Agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Team Name _____	Division _____
League Executive Board Member and Position (Printed) _____	
League Executive Board Member Signature _____	Date _____
League President Name (Printed) _____	
League President Signature _____	Date _____