

Liability Waiver & Release

In consideration of my child's participation in the Zimmerman Classic Baseball Tournament, I, the undersigned parent/guardian, agree and acknowledge that there are several assumed risks and hazards associated with my child's participation in the tournament, including but not limited to physical injuries (including sprains, strains, twists, cuts, scrapes, fractures or even death), surface hazards or equipment failures. I fully assume all risks associated with my child's participation in the tournament. I hereby waive, release, and forever discharge for myself, my family members, heirs, administrators, and assignors, any and all rights or claims which I have, or may have in the future, against the Zimmerman Classic Baseball Tournament, Zimmerman Youth Baseball, the City of Zimmerman, Minnesota, ISD 728, their volunteers or staff members. If my child is injured and requires medical care, I agree to oversee and authorize such care solely at my own cost and discretion. I hereby certify that I have read and understand the foregoing document and sign it knowingly, willingly and voluntarily. I also understand that my failure or refusal to sign this document will nullify my child's participation in the Zimmerman Classic Baseball Tournament. Any player participating in the Zimmerman Classic Baseball Tournament without a signed Liability Waiver & Release is doing so without the consent or permission of the Zimmerman Classic Baseball Tournament.

Team	Name:
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Coach Name:

Player Name (Printed) Parent Signature **Date** 1-2-3-4-5-6-7-8-9-10-11-12-13-14-15-