

Petersburg Generals Baseball Academy



Waiver Release & Liability

Name: _____ **Date:** _____

Person to Contact in case of an Emergency _____

Phone number where that person can be reached _____

Participant (*and parents or legal guardian, if participant is under 18 years of age*) agrees to indemnify and hold harmless Petersburg Generals Baseball Academy and its agents against any and all losses, injuries or damages to any person or thing that shall arise from the participant's training in the Petersburg Sports Complex.

I hereby give permission for emergency medical treatment for my son/daughter in the event that I cannot be reached. This signature also insures that I waive and release the Petersburg Generals Baseball Academy, its coaches, instructors and employees from any and all liability from any injury of any kind which may occur on the way to, during or on the way home from any session at the Petersburg Sports Complex.

This agreement shall remain in effect until such time as I notify the Petersburg Generals Baseball Academy in writing to terminate it.

Parents Signature: _____ **Date:** _____