



RELEASE OF LIABILITY WAIVER

DIVISION (Circle one) BASEBALL/SOFTBALL 14U___ 16U___ 18U___

TEAM NAME: _____ HOME PHONE: (____) _____

MANAGER'S NAME: _____ CELL PHONE (____) _____

ADDRESS: _____ EMAIL: _____

CITY: _____ STATE: _____ ZIP: _____

WAIVER/RELEASE OF LIABILITY

I realize that that participation in athletics as a participant or spectator and other such events can be potentially hazardous. I certify that myself, or (on behalf my child) is in good health and fully capable of safely participating in this event. I freely accept the risks (on behalf of my child) and release the Cascade Event staff, umpires, officials, and any other stakeholders involved in tournament functions and administrative process. I (on behalf of my child) hereby agrees and acknowledges to any respective event sponsors or promoters, including, without limitation, all charities benefiting from the event, individually and collectively, together with each of their respective affiliates, officers, employees, partners, shareholders, members, board members, sponsors, volunteers, tenants, contractors, agents, successors and assigns (organizers) that a strenuous activity, such as baseball, is potentially hazardous, and the participant hereby assumes all risks associated with participating in the event, including, potential injury or even death, due to falls, contact with other participants, the effects of weather and condition of playing surface etc.. I hereby release Cascade Event Management's staff, sponsors, umpires, officials, and any city/county officials, workers, and agents of any liability from injury, disability, death or loss of damage to person or property. I (as a parent) knowingly assume all such risks (as a spectator) and for my child to participate in the event conducted by Cascade Event Management. I (on behalf of my child) agree that the organizers have the right to record, broadcast and exploit in any and all media throughout the world a participant's involvement in the event and likeness, voice and biographical information in connection forthwith.

Player 1 _____	Parent Signature _____	Date _____
Player 2 _____	Parent Signature _____	Date _____
Player 3 _____	Parent Signature _____	Date _____
Player 4 _____	Parent Signature _____	Date _____
Player 5 _____	Parent Signature _____	Date _____
Player 6 _____	Parent Signature _____	Date _____
Player 7 _____	Parent Signature _____	Date _____
Player 8 _____	Parent Signature _____	Date _____
Player 9 _____	Parent Signature _____	Date _____
Player 10 _____	Parent Signature _____	Date _____
Player 11 _____	Parent Signature _____	Date _____
Player 12 _____	Parent Signature _____	Date _____
Player 13 _____	Parent Signature _____	Date _____
Player 14 _____	Parent Signature _____	Date _____
Player 15 _____	Parent Signature _____	Date _____

As the Team Manager, Director along with (Parent Signatures above) of the team listed above I hereby state that all of the information listed above is correct to the best of my knowledge and that all parents/guardians of players on this roster did in fact sign their names for this official roster. I agree that the players listed above are eligible to compete for/within the teams' program, events, and tournaments they should participate in.

MANAGER'S SIGNATURE _____ DATE _____