

Aztec Baseball League

P.O. Box 867 Chino, Ca 91708

Team Name:	
	lust be filled out completely.)
Name:	
Address:	 _
City: 2	Zip:
Birthdate:	
of eighteen but at least of 16 year give permission for Participant to acknowledge that the nature of the hazards or risks that may result in a lunderstand and appreciate consideration of Participant being Participant's health and of his/health least the Aztec Base employees and representatives for personal representatives, estate, and causes of action for loss of colliness or injury to Participant's personal representatives.	of the above-named Participant who is under the age rs of age. I am fully competent to sign this Agreement. I participate in the Aztec Baseball League . I ne activity may expose the above-named Participant to n Participant's illness, personal injury, or death. It that nature of such hazards and risks. In g permitted to participate, I hereby accept all risk to r injury or death that may result from such participation. ball League, Inc. , its governing board, officers, rom any and all liability to Participant, Participant's heirs, next of kin, and assigns for any and all claims or damage to Participant's property and for any and all erson, including his/her death, that may result from or pation, whether caused by negligence of the Institution, ployees, or representatives, or otherwise.
A RELEASE OF ALL CLAIMS AI INJURY OR DEATH OR DAMAGE WHILE PARTICIPATING IN THE ME TO INDEMNIFY THE PARTICIPATH OF ANY PERSON AND	AD THIS AGREEMENT AND UNDERSTAND IT TO BE ND CAUSES OF ACTION FOR PARTICIPANT'S BE TO PARTICIPANT'S PROPERTY THAT OCCURS AZTEC BASEBALL LEAGUE AND IT OBLIGATES ES NAMED FOR ANY LIABILITY FOR INJURY OR DAMAGE TO PROPERTY CAUSED BY OR INTENTIONAL ACT OR OMISSION.
Parent/Guardian (Print n	ame)
Signature of Parent/Gua	rdian
Relationship:	
Date:	Contact Number:
League Approval: Date:	Release ends on: