



LAVA BEAR
YOUTH SPORTS FOUNDATION

2019 PLAYER REGISTRATION FORM

Player Name: _____

Player Birthdate: _____ L.L. / Tournament Age: _____

Current School: _____ Grade: _____

Parent / Guardian Name: _____

Address: _____

City / State / Zip: _____

Phone: _____

Email: _____

Parent / Guardian Name: _____

Address: _____

City / State / Zip: _____

Phone: _____

Email: _____

Waiver and Release

I/We, the parent(s)/guardian(s) of the above named player, hereby give my/our approval to participate in any and all Lava Bear Youth Sports activities, including transportation to and from the activities. I/We know that participation in baseball may result in serious injuries to players and do hereby waive, release, absolve, indemnify and agree to hold harmless, Lava Bear Youth Sports Foundation, Bend Senior High School, organizers, sponsors, coaches, volunteers, supervisors, participants, board members and/or assigns from any and all claims arising out of any injury to my/our player whether the result of negligence or for any other cause. I understand that the coaches, supervisors and volunteers will use their best judgment in determining medical care and procedures and in case of injury, illness or accident, they are authorized to obtain immediate medical treatment. I hereby release the coaches, supervisors and volunteers from any and all liability associated with providing or obtaining medical care. I/We understand that I/We are responsible for any and all medical costs resulting from injury to the above named player. I/We are signing this release on behalf of myself/ourselves and the above named player.

Parent/Guardian Signature: _____ Date _____

Parent/Guardian Signature: _____ Date _____