Puyallup Baseball Club Liability Waiver Form for Youth Participants

I, the parent/legal guardian of _______, hereby acknowledge that my child/ward is voluntarily participating in Puyallup Baseball Club activities, events, and programs (the "Activities"). I understand that the Activities may involve inherent risks and dangers, including but not limited to those arising from physical exertion, weather conditions, equipment malfunction, or other unforeseen circumstances.

In consideration of allowing my child/ward to participate in the Activities, I hereby assume all risks and dangers associated with the Activities, whether known or unknown, and waive, release, and discharge Puyallup Baseball Club, its officers, directors, employees, agents, volunteers, and representatives (the "Released Parties") from any and all claims, damages, injuries, or losses arising out of or related to my child/ward's participation in the Activities.

I also agree to indemnify and hold harmless the Released Parties from any and all claims, damages, injuries, or losses arising out of or related to my child/ward's participation in the Activities, including but not limited to any claims brought by third parties.

I understand and acknowledge that my child/ward's participation in the Activities is entirely voluntary and that I am solely responsible for my child/ward's actions while participating in the Activities. I further acknowledge that Puyallup Baseball Club is not responsible for any injuries, damages, or losses that may occur as a result of my child/ward's participation in the Activities.

I understand that this waiver and release of liability is intended to be as broad and inclusive as permitted by law, and that if any provision of this agreement is held to be invalid or unenforceable, the remaining provisions shall continue in full force and effect.

I have read this waiver and release of liability, fully understand its terms, and sign it freely and voluntarily without any inducement.

Parent/Legal Guardian's Signature: _____

Printed Name:	
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Date:
