

Baseball 2018 ♦ Grades 6-8

PARENT / GUARDIAN CONSENT FORM AND INDEMNITY AGREEMENT

Participant Name: _____ DOB: _____ Grade 6 Teacher KC
 Parent/Guardian (1): _____ cell _____
 Parent/Guardian (2): _____ cell _____
 Home Address: _____
 Email: _____

Destination: School Gym – home & away

Individual in Charge: Adult volunteers will coach

Date/Time: Afternoons/early evenings in March, April & May 2018

Transportation: Parents are responsible for transportation to and from practices/games

Cost of Event: *Smart Tuition charge of \$75.00*

I, _____, grant permission for _____
PRINT Parent or Guardian's First and Last Name PRINT Child's Name

to participate in the above-named activity and I warrant that my child is in good health. In consideration of my child's participation, I agree to indemnify the parish/school and the Archdiocese of St. Paul/Minneapolis by myself, my child or others, that arises out of any behavior by my child at the event/activity described above. I also agree to pay reasonable attorney's fees or expenses incurred by the parish/school and Archdiocese in defense of such a claim/lawsuit. Conditions of participation are that every student agrees to abide by the rules governing this activity and to cooperate with the coach/teacher/chaperone. Every effort will be made to insure proper safety conditions and supervision, but neither the school or the chaperones will accept legal responsibility for accidents or injuries. If you agree to permit your son/daughter to participate in this activity with this understanding, please indicate below.

Medication my child is taking at present: _____
 Allergies: _____

In the event of an emergency, and you are unable to reach me at the above numbers, contact:

(Name) Phone No.

As Parent or Guardian, I agree to all of the above-stated considerations and conditions.

Parent or Guardian's Signature Date

Please return this form to school by tryouts - February 25, 2018