2015 TEAM REGISTRATION/WAIVER

TEAM NAME: _____ COACH NAME:_____

"As a participant in the tournament, my parents/guardians and I agree and acknowledge that there are certain risks of physical injury, and I and my parents/guardians agree to assume the full risk of any injuries, including death, damages or losses which I may sustain as a result of participating in any and all activities connected with, or associated with, such tournament", and we agree to waive and relinquish all claims I and my parents/guardians may have as a result of participating in the tournament against Dream Big Baseball, Inc. and its officers, agents, servants, and employees.
"My parents/guardians and I do hereby fully release and discharge Dream Big Baseball, Inc. and its officers, agents, servants, and employees from any and all claims from injuries, including death, damages or losses which I may have or which may occur to me on account of my participation in the tournament."
"My parents/guardians and I further agree to indemnify, hold harmless and defend Dream Big Baseball, Inc. and its officers, agents, servants, and employees from any and all claims resulting from injuries, including death, damages and losses sustained by and arising out of, connected with , or in any way associated with the activities of the program/tournament."
"My parents/guardians and I have read and fully understand the above Program Details and Waiver and Release of All Claims Sections."

PLAYER NAME	BIRTHDATE	STREET ADDRESS, CITY, STATE	PARENT NAME PRINTED	PARENT SIGNATURE	DATE
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