



# Spartan Youth Activities 2018 Boys Baseball Sign-Up Form

Spartan Boys Baseball will play in the Loup Valley League with Arcadia, Burwell, Central Valley, Ord, Sargent and Spalding. *Peewee division: age 11 & 12 on Jan. 1<sup>st</sup>. Coach Pitch Division: age 8, 9 & 10 on Jan. 1<sup>st</sup>. Last year all T-Ball was played as a 4-team league with all games in Ansley.* The same will be attempted this year depending on number of players. All boys will be placed on teams according to their age and grade. Preference is not to move a player up into a higher league unless necessary. **PARENTS: Coaches are needed in all divisions. If you are willing and able to coach, please volunteer.** **RETURN TO SCHOOL OFFICE BY: March 20th**

Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Player Shirt Size: YS YM YL AS AM AL AXL AXXL

Player FEE: \$20.00

Would you be interested in coaching? \_\_\_\_\_

Would you be interested in assisting? \_\_\_\_\_

Would you be interested in volunteering? Field Maintenance Concessions Fundraising Sponsoring

### 2018 Waiver of Liability

In return for my child (Participant) being allowed to participate in the Spartan Youth Activities Organization (the Program) I release and agree not to sue the program, its members, and their employees, sub-contractors, sponsors, agents, and affiliates from all present and future claims that may be made by the Participant or me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of the Participants participation in the Program, and caused by the ordinary negligence of the parties listed above, wherever, whenever, or however the same may occur. I understand and agree that those listed above are not responsible for any injury or property damage arising about of the Program, even if caused by their ordinary negligence. I understand that participation in the Program involves certain risks, including, but not limited to serious injury. I am voluntarily allowing Participant to participate in the Program with knowledge of the danger involved and agree to accept all risks of such participation. I certify that the participant is in excellent physical health and may participate in strenuous and hazardous physical activities to be played in the Program. Permission is granted for participant to receive emergency medical treatment, if needed. I also agree to indemnify and hold harmless those listed above for all claims arising out of Participants participation in the Program and all related activities. I am the parent or legal guardian of the Participant. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies. I represent that I am parent/legal guardian of the child named above and agree that the terms of this release are binding on me and the Participant.

**Liability Clause:** I/we the Parents/legal Guardian of the above-named Participant in the Spartan Youth Activities Organization hereby give my/our approval to their participation in any and all activities during the season. I/We assume all risks and hazards incidental to such participation, including transportation to and from all activities. I/We hereby waive, release, absolve, indemnify and agree to hold harmless the Spartan Youth Activities Organization, its organizers, sponsors, supervisors, board members, and other participants.

Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_