

WESTSIDE ATHLETIC ASSOCIATION
CHALLENGER DIVISION

RELEASE OF LIABILITY

I/We, the parent(s) or legal guardian(s) of _____, hereby give my/our permission for him/her to participate in any and all Westside Athletic Association, Inc. activities.

I/We know that participation in baseball could result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify and agree to hold harmless Westside Athletic Assoc., Inc., its officers and directors, Little League Baseball Inc. and Babe Ruth, the organizers, sponsors, supervisors, participants and persons transporting my/our child to and from activities, from any and all claims arising out of any injury to my/our child, whether the result of negligence or from any other cause, except to the extent and in the amount covered by accident or liability insurance, if any.

I/We hereby give my/our consent for any emergency medical treatment as approved by the manager or other adult escort in case of illness or injury while participating in Westside Little League games, practices, tournament play, or related activities. I/We understand that this is to prevent undue delay and assure prompt treatment and that only a licensed health care provider will engage for such an emergency.

Parent/Guardian Signature _____ Date _____

PHOTO RELEASE

I/We give permission for my child's photo to be included in future publicity media including, but not limited to newspapers, magazines, television, and the Westside Athletic Assoc., Inc. website.

Parent/Guardian Signature _____ Date _____

