

**Liability Release Form**

Southwest Montana Baseball Camp

Participant's Name

\_\_\_\_\_

I understand that participation in the above Activity or Event may be hazardous for the above-named participant.

In signing below, I assume risk of harm or injury which may occur to the participant as a result of participating in the above-named event or activity. I hereby release the **Southwest Montana Baseball Camp** and its coaches, employees, agents, and representatives from any liability, costs and damages resulting from this individual's participation.

If the participant is a minor:

I agree that the minor has my consent to participate in the event or activity.

I also give my consent for the business or organization to seek emergency treatment for the minor if necessary, and I agree to accept financial responsibility for the costs related to this emergency treatment.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Participant's Signature/Date/ Date of Birth**

\_\_\_\_\_

**Name of Parent or Guardian**

\_\_\_\_\_/\_\_\_\_\_

**Signature of Parent/Guardian/Date**

**Liability Release Form**

Bozeman Bucks

Participant's Name

\_\_\_\_\_

I understand that participation in the above Activity or Event may be hazardous for the above-named participant.

In signing below, I assume risk of harm or injury which may occur to the participant as a result of participating in the above-named event or activity. I hereby release the **Bozeman Bucks** and its coaches, employees, agents, and representatives from any liability, costs and damages resulting from this individual's participation.

If the participant is a minor:

I agree that the minor has my consent to participate in the event or activity.

I also give my consent for the business or organization to seek emergency treatment for the minor if necessary, and I agree to accept financial responsibility for the costs related to this emergency treatment.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Participant's Signature/Date/ Date of Birth**

\_\_\_\_\_

**Name of Parent or Guardian**

\_\_\_\_\_/\_\_\_\_\_

**Signature of Parent/Guardian/Date**

**TUESDAY, JULY 12, 2016**

**PLAYER INFORMATION SHEET**

PLAYER'S FULL NAME \_\_\_\_\_

SCHOOL \_\_\_\_\_

SUMMER TEAM \_\_\_\_\_

AGE \_\_\_\_\_

PRIMARY POSITION \_\_\_\_\_

SECONDARY POSITION(S) \_\_\_\_\_

BATS \_\_\_\_\_ THROWS \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_

CELL PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

PARENT'S NAMES \_\_\_\_\_

PLEASE MAIL REGISTRATION, WAIVERS &

CHECK TO: JOHNNY GRAHAM

SOUTHWEST MT BASEBALL

201 ANNIE GLADE

BOZEMAN, MT 59714

EMAIL [southwestmontanabaseball@gmail.com](mailto:southwestmontanabaseball@gmail.com)

*\*Registration due by June 12 to secure a t-shirt*