



I, \_\_\_\_\_ (participant), acknowledge that I have voluntarily applied to participate in the following activities at STEEL TOWN MAULERS BASEBALL.

**Private Baseball Training, Personal Training Advanced Baseball Tournament Play, Advanced League Play, Steel Town Maulers Facilities General Usage/Rental.**

OF THE RISKS AND HAZARDS CONNECTED WITH THESE ACTIVITIES AND THAT SUCH ACTIVITIES INCLUDE THE RISK OF INJURY OR EVEN DEATH. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

I verify this statement by placing my initials here: \_\_\_\_\_  
Parent or Guardian's initials (if under 18): \_\_\_\_\_

As consideration for being permitted by Steel Town Maulers Baseball the State of Pennsylvania, the County of Beaver, and any Steel Town Maulers Baseball representative while participating in these activities and the use of Steel Town Maulers Baseball premises and facilities. I release Steel Town Maulers Baseball, the State of Pennsylvania, the County of Beaver, any affiliated organization and their respective directors, officers, employees, volunteers, agents, contractors and representatives and Koloa Holdings LLC from any and all actions, claims, or demands that I, my guardians, spouse, and legal representatives now have, or may have in the future, for injury, death, or property damage related to (I) my participation in these activities, (II) the negligence or other acts, whether directly connected to these activities or not, (III) the condition of the premises where these activities occur, whether or not I am then participating in the activity. I also agree that I, my guardians, spouse, and legal representatives will not make claim against, sue or attach the property of any of the matters covered by foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND STEEL TOWN MAULERS BASEBALL AND SIGN IT OF MY OWN FREE WILL.

**If signed by Parent or Guardian:** I verify that the dangers of the activities and the activities and the significance of this Release and Waiver were explained to the participant and the Participant understood them.

I HEREBY CERTIFY that I have personal health insurance. My insurance information is:

\_\_\_\_\_  
Insurance Company, ID, Group Number

Executed on \_\_\_\_\_  
Date Signed

PARTICIPANT

PARENT OR GUARDIAN

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENTS OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED.