

## Informed Consent and Acknowledgement of Risk

Youth's Name: \_\_\_\_\_

**IN CONSIDERATION** of the right to attend and participate in the 2020 Spring season with Crandall Youth Baseball Softball Association ("CYBSA"), the parent/guardian of the above-identified youth hereby:

1. Authorizes and gives the youth permission to participate in youth baseball games offered through CYBSA;
2. Acknowledges that there is an element of risk involved in youth baseball and parent assumes all risk of and financial responsibility for any loss or injury to the participant or others that may occur as a result of the participant's negligence or misconduct; and indemnifies and holds the CYBSA harmless from and against any and all costs, claims, demands, charges, liabilities, obligations, judgments, executions, costs of suit and actual attorneys' fees incurred or suffered by the CYBSA as a result of, or arising out of, the participant's negligence or misconduct; and
3. Authorizes CYBSA to obtain or authorize any reasonable incidental and/or emergency medical treatment for the participant in the event the participant's parent(s)/guardian(s) are not readily located and participant becomes ill, injured or incapacitated; parent(s)/guardian(s) hereby accept the responsibility to pay for such treatment.

This Informed Consent and Acknowledgement of Risk may not be amended, supplemented or revoked without the written consent of CYBSA.

The parent(s)/guardian(s) signing below on behalf of participant acknowledge that they have read this consent and understand its contents.

\_\_\_\_\_  
Printed Name of Parent(s)/Guardian(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent(s)/guardian(s)