

Hamilton Babe Ruth Facility Use Waiver Form

Participar	nt's Name:		· · · · · · · · · · · · · · · · · · ·		
Date of B	irth:				
Address:					
Emergeno	cy Phone #			-	
Coach, Tr	ainer, (person providir	ng services):		
located w of the ser participal	acknowledge and agrithin the Hamilton Bal vices provided by Har nts, consultants, em on their behalf (herei	be Ruth Co milton Bab ployees, a	omplex have Ruth Or and all pe	as inherent risks. In rganization, their ag ersons or entities	consideration gents, officers, acting in any
1. I	acknowledge	and	fully , the pa	understand rticipant (if participar	that I , nt is 18 years of
engagin from my negliger that ther risks ma of condi participa	older) or parent/legal of in activities that may be own actions, inaction once of others or the concern may be other risks not any include, but are not litions in equipment or ants in this activity, employ, acts or omissions; consistions; consistions; consistions	guardian of involve risens, or negolitions of the ot known of mited to: negolitions, volumes,	of the abook of seriou gligence, the premise r not reason ature of the upplied by blunteers of	ove listed minor parus injury which mightout from the actions or of any equipmer onably foreseeable are activity, latent or a HBR or other entition agents of HBR; m	ticipant, will be t result not only s, inactions, or at used. Further, at this time. The pparent defects y; acts of other ny own physical

services.

- 2. I expressly agree and promise to accept and assume all the risks existing in this activity. My participating in this activity is purely voluntary and I elect, in spite of the risks, to participate. I assume all the foregoing risks and accept personal responsibility for the damages following such injury.
- 3. On behalf of myself, my children, my parents, my heirs, assigns, personal representatives I hereby voluntarily release, waive, forever discharge, and agree to indemnify and hold harmless the HLL commissioners, directors, agents, sponsors, and other employees, its parent, subsidiaries, affiliates, employees, distributors, and agents, other Batting Cage participants, and, if applicable, operator or lessors of premises used to conduct the event/activity, from any and all liability for any and all claims, demands of causes of action which are in any way connected with my participation in this activity or my use of the HBR equipment or facilities.
- 4. I hereby certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating in these activities or alternatively I agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions, which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.
- 5. I hereby certify that I have read and am familiar with the Batting Cage Rules and Regulations and will comply with conditions set forth therein.
- 6. I acknowledge and certify that I am at least 18 years old, or the parent or legal guardian of the participant under 18, and I agree I will wear a helmet at all times while in the Batting Cages. I hereby provide the HBR permission to administer basic First Aid and I authorize its agents or employees to contact 911 or other emergency personnel as needed.

By signing this document, I acknowledge that if anyone is hurt, or property is damaged during participation in this activity a court of law may find me to have waived my right to maintain a lawsuit against the HBR, and each of the other parties listed in Paragraph 3 above on the basis of any claim from which I have released them herein.

I HAVE HAD SUFFICIENT OPPORTUNITY TO READ THE ENTIRE DOCUMENT. I HAVE READ AND UNDERSTOOD IT, AND I AGREE TO BE BOUND BY ITS TERMS.

Participant Signature or Parent/Guardian if participant is under age 18:

Print Name and relationship	o of Signatory:	
Date		
Emergency Phone #	Email Address:	

Batting Cage & Field Rules

Please Initial:

* CAUTION! Injuries could result from the use of this area. Users should assume the inherent risks of flying baseballs and softballs. If users have any questions about the use of this device or the inherent risks associated with the use of this device, ask the attendant before using the batting cages.					
	* No gum, food or beverages (plain water only) in batting cage.				
	* Do not climb or pull on net.				
without	* No pitching machines or yellow pitching machine balls are permitted prior approval by HBR.				
	* Helmet must be worn and pitching screen in place.				
time wh	* Only one batter and one pitcher are allowed in the batting cage at a lile hitting live.				
rental).	* No live hitting outside of the batting cage (does not apply to field				
	* Baseball/softball cleats (of any kind) are not permitted.				
	* Batting Helmets & athletic indoor shoes must be worn at all times.				
	* The batting cage should not be left unattended.				
	* Rental groups must be supervised at all times by an adult.				

Rev: 12/2015