**TayBee Softball Pitching/Catching Clinic Waiver**

**RELEASE, INDEMNIFICATION, AND HOLD HARMLESS AGREEMENT**

In consideration for the Camper/Clinic Member being permitted to participate in the TayBee Softball Pitching & Catching Clinic any day between Saturday, December 11th, 2021 and Sunday, December 12th, 2021 (“Activity”), the undersigned, acting on behalf of ourselves and our child, and any heirs or assigns, hereby waive and release forever any and all rights for claims and damages we and/or our child/guardian may have against the employees, and the Camp/Clinic, and the Camp’s/Clinic’s owners, officers, agents and employees, from and against any and all liability for any harm, injury, damage, claims, demands, actions, costs, and expenses of any nature which we or our child may have or which may hereafter accrue to our child, arising out of or related to any loss, damage, or personal injury (including, without limitation, death), that may be sustained by our child at any Activity, or to any property belonging to child, whether caused by negligence or carelessness on the part of the TayBee Softball Pitching & Catching Clinic owners and employees, or the Camp/Clinic itself, or otherwise, while our child is in, on, upon, or in transit to or from the premises where the Activity, or any adjunct to the Activity, occurs or is being conducted.

We accept, understand, and assume that there is a risk of injury in any activity that occurs at camp, due to the physical and athletic nature of the activity, including, but not limited to, falls, contact with other participants, and running drills. The Camper agrees to follow all instructions and to wear all necessary, recommended, and appropriate protective gear and equipment.

We understand that this Activity is neither administered nor sponsored and that the Camp/Clinic is providing the instruction and camp/clinic Activities outside the scope of any affiliation with the institutions each athlete previously or currently attends(ed). We agree on behalf of ourselves, our Camper/Athlete, and any heirs or assigns to release, hold harmless, and indemnify the employees, or the Camp/Clinic, and the Camp’s/Clinic’s owners, officers, agents and employees from and against any and all claims and liability or damages of any kind or nature whatsoever arising out of or relating to the Activity.

Printed Name of the Camper/Clinic Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Camper/Clinic Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the Camper is a minor under the age of eighteen (18), signature of Parent or Guardian or Individual Acting as Guardian is required:

Signature of Parent or Guardian or Individual Acting as Guardian

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Email Address & Telephone Number:

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