

The Cumberland Force Travel Baseball/Softball Organization

8U ___ 9U ___ 10u ___ 12U ___ 14U ___ 17U ___ Birthdate cut-off for each age group is May 1 for Baseball and December 31 for Softball.

Player's Information:

Player's Name: _____ Birthdate: _____

Address: _____ Phone Number: _____

_____ Insurance Coverage for Child: Yes ___ No ___

_____ Doctor's Phone: _____

Special Medical Conditions: _____ Emergency Contact: _____

Parent/Guardian Information: (Please make sure to include preferred method of communication.)

Parent/Guardian Name: _____ Phone Number: _____

Address: _____ Cell Phone: _____

E-mail: _____ Is it ok to text information? Yes ___ No ___

I, Parent/Guardian of the above named player hereby given approval to his participation in any and all "Force" activities in the above mentioned baseball program during the current season. I assume all risks and hazards incidental to such participation including transportation to and from the activities: and do hereby waive, release, absolve, indemnify, and agree to hold harmless the parent, organizers, sponsors, coaches, participants and persons transporting the player to and from activities and for any claim arising out of an injury to the player. I also grant permission to managing personnel to authorize and obtain medical care from any licensed physician, hospital or medical clinic should the player become ill or injured while participating in team activities away from home, or at other times when neither parent/guardian is available to grant authorization for emergency treatment. I will furnish a certified birth certificate of the above named candidate upon request by officials.

Signature and relationship of Parent/Guardian

Date

Parent/Guardian Photo/Video/Audio Release

Yes No I grant the Cumberland FORCE Travel Baseball/Softball organization, irrevocable permission to record and/or disclose my child's identity, image, and voice arising out of documenting Cumberland FORCE travel baseball/softball youth programs and to use, reproduce and distribute such in whole or in part in video and/or sound recordings, films, photographs, transparencies, webpages, social media, local news media or any other media for any purpose on behalf of the Cumberland FORCE Travel baseball/softball organization without compensations to me and without any right for me to inspect or approve of the finished photograph, video, or audio recordings or other recordings.

Signature

Date _____

