

**Softball Newfoundland and Labrador CANpitch training form**

**GENERAL INFORMATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Province: \_\_\_\_\_  
City: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender:  Male  Female  
Email Address: \_\_\_\_\_

**ADDITIONAL INFORMATION**

Years of Pitching Experience: \_\_\_\_\_  
Local Softball Association You Play(ed) for \_\_\_\_\_  
Location of Training Session: \_\_\_\_\_ Instructor \_\_\_\_\_

**PARTICIPANT AGREEMENT**

In consideration of being allowed to participate in any way in the Softball Newfoundland and Labrador CANpitch training program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- a. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, while particular rules, equipment, and personal discipline may reduce this risk, the risk of injury does exist; and,
- b. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- c. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- d. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE and HOLD HARMLESS Softball Newfoundland and Labrador, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY NEGLIGENCE OF THE RELEASEES OR OTHERWISE

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTIONS OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT AND INDUCEMENT. I hereby give permission for my photograph to be taken and used by Softball Newfoundland and Labrador for publication of the photograph in brochures, web sites, leisure guides and other promotional materials created by Softball Newfoundland and Labrador, including permission for Softball Newfoundland and Labrador to copyright the photograph in its name. The purpose of the promotional materials is to encourage people to participate in the sport of softball, and to utilize Softball Newfoundland and Labrador's programs and services. The purpose of gathering the information on this form is to provide Softball Newfoundland and Labrador with the information needed to administer the Association's programs and services.

**FOR PARTICIPANTS OF MINORITY AGE (UNDER 18)**

This is to certify that I, as a parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in this program as provided above.

\_\_\_\_\_  
Athlete's Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**FOR PARTICIPANTS OVER THE AGE OF 18**

\_\_\_\_\_  
Athlete's Signature

\_\_\_\_\_  
Date