



2011

**GODDARD JR BASEBALL/SOFTBALL PARENT SHEET**  
**FAILURE TO ADHERE TO THE FOLLOWING RULES/POLICIES WILL**  
**LEAD TO STOPAGE OF PLAY UNTIL VIOLATORS HAVE LEFT.**  
**IF VIOLATORS FAIL TO LEAVE USD 265 SCHOOL GROUNDS, THE GAME**  
**WILL RESULT IN A FORFEIT FOR THE FRIENDS AND/OR FAMILY OF THE**  
**VIOLATORS!**

**\*\*\*Zero tolerance is in effect at all times for players, spectators, and coaches.\*\*\***  
**NO WARNINGS WILL BE ISSUED.**

- \*No Alcoholic beverages allowed on USD 265 grounds, this includes all parking areas.
- \*No tobacco products on USD 265 grounds.
- \*Do not leave your children unattended. Children must be under adult supervision at all times.
- \*Do not climb, hang, or deface trees, shrubs, fences, playground equipment, dugouts and buildings.
- \*Do not throw rocks.
- \*Pets are to be on a leash and cleaned up after, Pets are to remain outside the fenced in playing fields.
- \*Please place your trash in the nearest receptacle.
- \*Good Sportsmanship is demanded at all times, Spectators may cheer in a positive manner only, no derogatory comments against opponents will be tolerated.
- \*Illegally parked cars will be towed at the owners expense.
- \*Please use caution driving down Walnut Street, many kids cross quickly at any time.

Health Insurance Co.: \_\_\_\_\_ ID# \_\_\_\_\_

Special Health Concerns: \_\_\_\_\_

Doctor Name: \_\_\_\_\_ Doctor Phone: \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Shirt Size (Please Circle)

Youth6-8 Youth10-12 Youth14-16 Small Medium Large XL

**Player and Parent/Guardian Waiver, Release and Medical Authorization**

I understand that Baseball/Softball are an extreme test of my child's physical and mental limits. This sport carries with it the potential for serious injury, death and property loss. I agree to assume all the risk of my child's participation in Goddard Jr Baseball. I agree to all of the following for my family, my child, and myself:

- A) I waive, release and discharge from any and all claims or liabilities for personal injury, for death or damages of any kind which may arise out of or relate to my child's and families participation in Goddard Jr Baseball, the following persons and entities: Goddard Jr Baseball, it's directors, employees, coaches, and instructors, parents, players, the City of Goddard, and USD #265.
- B) I agree not to file suit or bring any legal actions against any of the persons and entities listed above.
- C) I indemnify and hold harmless the persons and entities above from any claims made or liabilities assessed against them as a result of my actions.

I hereby authorize any licensed physician, emergency medical technician, hospital or other medical facility to treat my child listed above for the purpose of attempting to treat or relieve any injuries arising out of or relating to my child's participation in Goddard Jr Baseball activities. I authorize any such medical provider to perform all procedures deemed medically prudent in the treatment of my child. I consent to the administration of anesthesia as deemed advisable. I assume all the risk and responsibility for the treatment of my child.

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_