

Elizabeth Seton High School Middle School Softball Clinic
Elizabeth Seton High School Brooks Center Gymnasium
5715 Emerson Street Bladensburg, MD 20710
(301) 864-4532

PARTICIPANT WAIVER / RELEASE

Name of Participant: _____
(Last) (First)

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

List Medical Concerns / Allergies : _____

Emergency Contact:

Name: _____ Phone: _____

-----Release-----

I, _____, AGREE TO INDEMNIFY AND HOLD HARMLESS ELIZABETH SETON HIGH SCHOOL AND THEIR AGENTS, REPRESENTATIVES, SUCCESSORS AND ASSIGNS AGAINST ANY AND ALL CLAIMS BY OR ON BEHALF OF ANY PERSON OR LEGAL ENTITY ARISING FROM THE APPLICANT'S USE OF PREMISES. THE CONDUCT OF APPLICANTS BUSINESS OR FROM ANY ACTIVITY PERMITTED BY THE APPLICANT IN OR ABOUT THE PREMISES, OR ARISING FROM ANY ACT OF NEGLIGENCE OF THE APPLICANT AND FROM AND AGAINST ALL COST, ATTORNEY'S FEES, EXPENSES, AND LIABILITIES INCURRED IN OR ABOUT ANY CLAIMS OR PROCEEDING BROUGHT THERE ON. APPLICANT FURTHERMORE AFFIRMS THAT HER PHYSICAL CONDITION AND FITNESS ARE ADEQUATE TO PARTICIPATE SAFELY IN THIS PROGRAM/ACTIVITY.

(Signature of Parent/Guardian)

(Date)