



# BASES

## Baseball And Softball Essential Skills

Name : \_\_\_\_\_ E-Mail Address : \_\_\_\_\_  
Gender (circle): M F Home Phone : \_\_\_\_\_  
Address : \_\_\_\_\_ Cell Phone : \_\_\_\_\_  
City : \_\_\_\_\_ Cell Provider : \_\_\_\_\_  
State : \_\_\_\_ Zip: \_\_\_\_\_ Date of Birth : \_\_\_\_\_ Age: \_\_\_\_\_

Name of Parent or Guardian (for minors): \_\_\_\_\_

Emergency Telephone No: \_\_\_\_\_

List Any Health Issues That Would Be Important to Know in Case of Emergency:

\_\_\_\_\_

Please check one category:

Baseball  Fastpitch Softball  Dodgeball  
 Baseball Coach  Fastpitch Coach  Birthday Parties  
 Slow Pitch Softball  Other Sport – list \_\_\_\_\_

### RELEASE OF LIABILITY

Participating in sports activities, such as those offered at BASES, increases an individual's inherent risk of bodily injury. In practicing at BASES (Baseball And Softball Essential Skills) Training Facility, the participant understands that he/she attending the programs and using BASES and the facilities does so at his/her own risk. ENFUCO Enterprises, LLC and its owners, employees or agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant with his/her family or team in or about any programs on the premises. Participants and parents assume full responsibility for all injuries and damages which occur in or about any programs on the premises. He/She does hereby fully and forever release, discharge, and hold harmless ENFUCO Enterprises, LLC, all associated facilities and its owner, employees, and agents from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility. In addition, he/she agree(s) to follow the rules of conduct and play set by BASES. Failure to do so may result in suspension from participation.

Consent: I, the undersigned participant (parent or guardian signature required for participants under the age of 18), do hereby grant authority to the staff at BASES to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby authorize BASES and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional materials or team films.

Participant (Parent/Guardian for participants under the age of 18) Signature: \_\_\_\_\_

Date: \_\_\_\_\_