

2020 Adult Liability Release & Medical Aid Consent

RELEASE OF LIABILITY

I hereby give approval for participation in Eastlake Little League (the "League") programs and sponsored events. Participation in programs sponsored by League involves potentially hazardous activities such as batting, running, sliding, strenuous exercise, and use of equipment that could lead to serious injury and/or death. I acknowledge and assume all these risks. In exchange for participation in the programs and using the League's equipment and fields provided, I release and agree to hold harmless, the League, their agents, employees, officers, directors, and Little League Baseball, Inc. from all claims for injury, death, property damage and expenses, including attorney fees, arising from the participation in the League's programs and the use of their fields and equipment provided, whether the result of any negligence or for any cause, except to the extent and in the amount covered by accident/liability insurance.

PROOF OF AGE

I certify that I am at least age 18, as of November 1, 2019.

PLAYER PROOF OF RESIDENCY

I understand that all players must either 1) have a primary residence or 2) attend a school, within the Eastlake Little League boundary (as defined by Little League Baseball Incorporated, and confirmed through the [Little League Finder](#)). All players' parents, who are basing league eligibility on residence, must provide proof of legal residence and confirm their residence is within the League's local boundary. Alternatively, if eligibility to play with Eastlake Little League is based on the player attending a school that is within the League's local boundary, the appropriate school enrollment form must be completed and signed by a school official. I understand that local boundary exceptions are only allowed for divisions where Eastlake Little League is interlocked with another local Little League (e.g. Junior and Senior baseball or softball). I understand that players must be eligible under the residence regulations to participate in his Local League, and that if any controversy arises regarding residence and/or age, the decision of the Charter Committee in Williamsport shall be final and binding. I further understand that if any player on a Little League team does not qualify for participation in the league based on residence (as defined by Little League Baseball, Incorporated) and/or age, such participant and/or team on which he/she participates be found ineligible, and forfeit(s) and/or suspension of Tournament privileges may be decreed by action of the Charter Committee or Tournament Committee.

EQUIPMENT

I agree to return upon request the uniforms and other equipment issues to me in as good a condition as when received, allowing for normal wear and tear.

CONSENT TO MEDICAL CARE & TREATMENT

In case of emergency, if family physician cannot be reached, I hereby authorize myself to be treated by Certified Emergency Personnel (i.e. EMT, First Responder, ER Physician). If deemed necessary, I authorize myself to be transported by 911 aid to the nearest hospital.