

TNT Properties, Inc. dba TNT Sportsplex

Release and Waiver of Liability

In consideration of being allowed to participate in any way in the **TNT Sportsplex** facility, the undersigned agrees to all items below:

1. Agrees that prior to participating; they will inspect the playing facility and equipment to be used, and if they believe anything is unsafe, they will immediately advise their coach, parent, or any staff member of TNT Sportsplex of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant may be engaging in activities that involve risk of serious injury including permanent disability and death, and severe social and economic losses which might result not only from their actions, inactions or negligence, but the actions, inactions or negligence of others or the condition of the premises or of any equipment used. Further, that there may be other risks not known or not reasonably foreseeable at this time.
3. Acknowledge that it is the participant's responsibility to be properly insured and/or pay all medical costs in the event of any injury and to be knowledgeable of where to contact assistance in the case of emergency.
4. Assume all foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
5. Release, waive, discharge and covenant not to sue **TNT Properties, Inc dba TNT Sportsplex**; their respective officers, members, coaches, employees or volunteers, other participants, sponsors, and if applicable, owners and lessors of the premises, all of which are hereinafter referred to as "releases", from demands, losses, or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or part by the negligence of the release or otherwise.
6. In the event that injury or illness occurs while using the **TNT Sportsplex** facility, I hereby authorize any emergency first aid, medication, medical treatment or surgery necessary by licensed medical personnel. I also give my permission for attending medical personnel to execute on my behalf if I am not immediately available to do so. This includes the cost of transportation to an emergency facility and/or hospital.

The undersigned has read the above waiver and release, understands that they have given up substantial rights by signing it, and sign it voluntarily.

Signature (Each participant and a parent/legal guardian for minor participants, must sign a release and waiver liability form to participate in any activity at the **TNT Sportsplex** facility)

Printed name of participant	Participants Signature	Date	DOB
_____	_____	_____	_____
Printed name of Parent/Legal Guardian	Parent/Guardian Signature	Date	Phone #
_____	_____	_____	_____