



2019 Player/Parent Agreement

Instructions (teams that belong to a multi-team program):

1. Team manager keeps a copy on file.
2. Team manager forwards a copy to the Program Director or Coordinator.
3. Program Director or Coordinator forwards a copy to the District Supervisor.

Instructions (Individual teams):

1. Team manager keeps a copy on file.
2. Team manager forwards a copy to the District Supervisor.



Knothole Baseball, Inc.

2019 Player/Parent Team Agreement

KnotholeBaseball.com

FIRST NAME: _____

MIDDLE NAME: _____

LAST NAME: _____

ADDRESS: _____

STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

DATE OF BIRTH: _____

SCHOOL: _____

I hereby agree to play during current season in

AGE CLASS: _____ TEAM (If Applicable): _____

DISTRICT: _____ DATE: _____

PLAYERS SIGNATURE: _____

To the best of my knowledge my child is physically fit and able to play baseball and I agree as parent or guardian to furnish a doctor's statement to the affect if requested by the Team Manager or the District Supervisor. It is understood that Knothole Baseball, Inc. does not take responsibility for the physical fitness of players and that as the parent or guardian I bear the responsibility for my child's physical condition.

I hereby agree that the Knothole Baseball, Inc., its members, coaches, officers, sponsors and any Parks District, School Board, or the like entity whose facilities are utilized shall not be liable for any injury or loss which my child or children may sustain while participating in activates of any kind, whether sponsored by or under the supervision of Knothole Baseball, Inc., and I agree to indemnity and to hold harmless these parties and their members, coaches, officers, sponsors or designates of any kind from any claim whatsoever.

Parent or Guardian Sign: _____ Date: _____

I accept this agreement for the player list above to play for my team.

Coach's Signature: _____ Date: _____