

PHOTO WAIVER

Our signature below conveys our permission for the player named on this form to be photographed by TP Houseleague personnel during the season and for these photos to be displayed on the Toronto Playgrounds Houseleague Baseball website and to be used in promotional/sponsor recognition materials (including websites of sponsor organizations).

Parent signature _____

VOLUNTEER INFORMATION

I wish to coach I wish to umpire I wish to scorekeep

(If there is more than one interested volunteer please contact us at tpbaseball@gmail.com.)

Name _____ E-mail _____ Phone _____

Please check here if you are interested in sponsoring a team. The cost is \$350.00/team. For this the sponsor's name is on the front of a team set of jerseys and sponsors receive a recognition plaque with the team photo and a listing on our website. I'd like to sponsor a team:

Name _____ E-mail _____ Phone _____

RISK WAIVER & CONSENT FORM

I recognize that risk of injury or potential health risk may be involved in participation in the above-named program/activity. I hereby willingly assume such risk of injury or health risk for the above-named person(s) for whom I am in law responsible and assume full responsibility during and after their participation in the program/activity. In consideration of the acceptance of this application and the permission to participate in the program/activity, I, for myself, my heirs, executors, administrators, successors and assigns **HEREBY RELEASE, WAIVE, AND FOREVER DISCHARGE** the Toronto Playgrounds Houseleague Baseball Organization and all their respective agents, employees, officials, volunteers, servants, contractors, representatives, elected and appointed officials, successors and assigns **OF AND FROM ALL** claims, demands, damages costs and actions whatsoever and however caused, arising or to arise by reason of my child's participation in the program or any of its associated activities.

Signature of Parent/Guardian: _____

Date: _____ E-mail _____ Phone _____