



Waiver of Liability and Release for use of Batting Cage and Pitching Machine

I hereby acknowledge and agree that participation in the batting cage within Lakeside Recreation Facility has inherent risks. In consideration of the services provided by Lakeside Recreation Facility, their agents, officers, participants, consultants, employees and all persons or entities acting in any capacity on their behalf (hereinafter referred to as Lakeside Recreation Facility) I now agree and certify as follows:

1. I acknowledge and fully understand that I, _____, the participant (if participant is 18 years of age or older) or parent/legal guardian of the above listed minor participant, will be engaging in activities that may involve risk of serious injury which might result not only from my own actions, inactions, or negligence, but from the actions, inactions or negligence of others or the conditions of the premises or of any equipment used. Further, that there may be other risks not known or not reasonably foreseeable at this time. The risks may include, but are not limited to: nature of the activity, latent or apparent defects of conditions in equipment or property supplied by Lakeside Recreation Facility or other entity; acts of other participants in this activity, employees or agents of Lakeside Recreation Facility; my own physical conditions, acts of omissions, conditions of Lakeside Recreation Facility and surrounding grounds or terrain and accidents connected with their use, first aid emergency treatment or other services.
2. I expressly agree and promise to accept and assume all the risks existing in this activity. My participation in this activity is purely voluntary and I elect, in spite of the risks, to participate. I assume all the foregoing risks and accept personal responsibility for the damages following such injury.
3. On behalf of myself, my children, my parents, my heirs, assigns, personal representative I hereby voluntarily release, waive, discharge, and agree to indemnify and hold harmless Lakeside Recreation Facility and each of their respective commissioner, directors, agents, and other employees, its parent subsidies, affiliate, employees, distributors, and agents, other batting cage participants, and if applicable, operator or lessors of premises used to conduct the event/activity, from and all liability for any all claims, demands of causes of action which are in any way connected with my participation in this activity or my use of Lakeside Recreation Facility equipment or facilities.
4. I hereby certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating in these activities or alternatively I agree to bear the cost of such injury or damage myself. I further certify that I have no medical or physical conditions, which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of all risk that may be created, directly or indirectly, by any such condition.
5. I hereby certify I am at least 18 years old, or the parent or legal guardian of the participant under 18, and I agree I will wear a batting helmet at all times while in the batting cages. I hereby provide Lakeside Recreation Facility permission to administer basic first aid and I authorize Lakeside Recreation or its agents or employees to contact 911 or other emergency personnel as needed.
6. I hereby certify that I have been given Rules & Regulations for batting cage use and will adhere to them.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during participation in this activity, a court of law may find me to have waived my right to maintain a lawsuit against Lakeside Recreation Facility and each of the parties listed in Paragraph 3 above on the basis of any claim from which I have released them herein.

I HAVE HAD SUFFICIENT TIME TO READ THIS ENTIRE DOCUMENT. I HAVE READ AND UNDERSTOOD IT AND I AGREE TO BE BOUND BY ITS TERMS.

Participant Signature or Parent/Guardian if participant is under age 18: _____

Print Name of Signatory: _____ Date: _____

Name of Child if under 18: _____ Team Name: _____