SUMMER KNIGHTS CLASSIC OFFICAL TEAM ROSTER & WAIVER



Team Name:			Age Division:	
Manager:			Signature:	
Coach:			Signature:	
Coach			Signature:	
No.	Print Player's Name	Date of Birth	Best Contact Phone	Parent/Guardian Signature
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MANAGER, COACHES, AND PARENTS SIGNATURES ABOVE ACKNOWLEDGE AND AGREE TO THE BELOW ASSUMPTION OF RISK AND RELEASE OF LIABILITY: Page 1 of 2

In consideration of being allowed to participate in the Summer Knights XIX Baseball Tournament, and the related events and activities, services, games, fields, facilities and equipment. I understand that direct supervision by the Federal Way Knights Baseball Club is not provided and by participating in or using the related events and activities, services, games, fields, facilities and equipment, me and/or my child will be exposed to the risk of injuries and illness, including but not limited to communicable diseases such as MRSA, influenze and COVID-19, including but not limited to temporary or permanent muscle soreness, sprains, strains, cuts, abrasions, bruises, ligament and/or cartilage damage, head, neck or spinal injuries, loss of use of arms and/or legs, eye damage, disfigurement or death. I also recognize that there are both foreseeable and unforeseeable risks of injury or death that may occur as a result of mine or my child's participation in or use of the related events and activities, services, games, fields, facilities and equipment that cannot be specifically listed. Further, I recognize that the actions of others may cause harm or loss to mine or my child's person or property. I acknowledge that participation in this event may result in exposure to COVID-19 (novel coronavirus) and other contagious diseases and that the risk of exposure cannot be entirely eliminated. I accept that participation in this program may expose me, my children or family members to COVID-19 or other contagious diseases. I understand that the program may institute reasonable screening measures such as self-checks and temperature checks to reduce the risk of exposure to COVID-19 and other communicable diseases and agree to abide by those procedures. I further understand that any program participant may be excluded from the event at the sole discretion of Federal Way Knights, if they exhibit an elevated temperature, other signs of obvious illness, or repeatedly fail to

MANAGER, COACHES, AND PARENTS SIGNATURES ABOVE ACKNOWLEDGE AND AGREE TO THE BELOW ASSUMPTION OF RISK AND RELEASE OF LIABILITY: Page 2 of 2

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follow social distancing rules. I will explain these rules to my child, as requested. I understand that the program operations may be closed or limited on short notice, based on the guidance of state and local health authorities.

I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Federal Way Knights Baseball Club (the "Club") their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

I release the Federal Way Knights Baseball Club and their officers, official, agents and/or employees, other participating sponsoring agencies, organizers, event venues/facilities property owners, advertisers and if applicable, owners and lessors of premises used to conduct the event and their respective agents, officials, and employees from any and all liability, claims, costs, expenses, injuries or losses including those resulting from acts of negligence by the Federal Way Knight Baseball Club that I, or my child may otherwise sustain as a result of my or my child's participation in or using their related events and activities, services, games, fields, facilities and equipment. I also release the Federal Way Knights Baseball Club from loss or damage to the person or property of mine or my child caused by others.

If any part or portion of this Assumption of Risk and Release of Liability is determined to be invalid or unenforceable, the remaining parts or portions shall be enforceable to the fullest extent permitted by law.

By signing as the parent or guardian of a minor child, I represent that I am the legal parent or guardian of the child. I, the undersigned parent or legal guardian, acknowledge that I am also signing this Assumption of Risk and Release of Liability on behalf of the minor child and that the minor child shall be bound by the terms of this Assumption of Risk and Release of Liability.

In the case of an emergency where I cannot be reached, I hereby give authorization to the Federal Way Knights Baseball Club, its employees, volunteers, agents or representatives and the treating physician to obtain or provide what medical treatment is deemed necessary for the immediate welfare of my child as named above.

Moreover, we hereby verify that all coaches, managers, players and their parent/guardian listed above have compiled with mandated polices for the management of concussions and head injuries as prescribed by Washington State Law amended by HB 1824, section 2, also known as the "the Zachery Lystedt Law."

I have carefully read this Assumption of Risk and Release of Liability and fully understand its contents. I am aware that this Assumption of Risk and Release of Liability is a contract between the Federal Knights Baseball Club and myself and on behalf of my minor child (as named above), I sign it of my own free will.