

I, _____ confirm that I have collected a Parental Waiver,
(Name of the coach)
Release of Liability, Indemnification and Consent Form for each of our participating
players on our team _____ signed by the parent or legal
(Name of the team)
guardian of each such participating player prior to commencement of and for each
participating player's participation in baseball/softball practice activities for our team
_____ at the practice facility of Bat Cave Player, LLC
(Name of the team)
located at 3845 West National Road, Springfield, Ohio. I further agree that before any
additional player participating is allowed to engage in practice activities for our team
_____ at the Bat Cave Player, LLC at the 3845 West
(Name of the team)
National Road address, I will collect a Parental Waiver, Release of Liability,
Indemnification and Consent Form signed by the parent or legal guardian of each such
additional player.

Team/Group Roster

Coach/Responsible Adult signature

Coach/Responsible Adult printed

Date

Email

Phone #

Cancellation Policy:
We require 5 full days notice of cancellation
for scheduled time in order to receive a full
refund for that time. The only exception to
this is in the case of an extreme weather
event that would make driving conditions
too hazardous.