

The Ripken Experience (Extra Bases, LLC) Parental Waiver, Release of Liability and Indemnification Agreement

The Ripken Experience, Extra Bases, LLC, Burroughs and Chapin Company, Inc., and Ripken Myrtle Beach Academy, LLC is not responsible for any injury or loss of property suffered by any individual while playing, practicing, or engaging in any activity whatsoever at The Ripken Experience in Myrtle Beach, SC. This included ordinary negligence on the part of The Ripken Experience, it's agents, employees, sponsors, volunteers, owners, lessor's of the premises and all other that are involved.

In consideration of my being allowed to participate in The Ripken Experience program, and related events and activities, I hereby release and covenant not to sue Extra Bases, LLC, or any of their employees or agents for any and all present and future claims resulting from ordinary negligence on the part of Extra Bases, LLC or others listed for property damage, personal injury, or wrongful death, arising as a result of my engaging in or receiving instruction in The Ripken Experience programs and the activities incidental thereto, wherever, whenever or however same may occur. I hereby voluntarily waive any and all claims that may be made by me, my family, estate, heirs or assigns resulting from ordinary negligence, both present and future.

Further, I am aware that baseball is a vigorous team sport that at times involves severe cardiovascular stress and violent physical contact. I understand that baseball involves certain risks, including but not limited to death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage, and injury to virtually all bones, joints, muscles and internal organs, and that equipment provided for my protection may be inadequate to prevent serious injury. I further understand that baseball involves a particularly high risk of ankle and knee injury.

In addition, I understand that my participation at The Ripken Experience involves activities incidental thereto; including but not limited to travel to and from site, off-site travel to other events and activities not affiliated with Extra Bases, LLC. Participation at these other events and activities may be at sites that are remote from available medical assistance and there may be possible reckless conduct from other participants. I am voluntarily participating in these activities with full knowledge of the possible dangers involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

Additionally, by signing below, I give The Ripken Experience and All American Imaging full permission to reproduce and publish any photograph, video or likeness of my child for advertising, commercial or any marketing related purpose.

I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of the State of South Carolina and agree that if any portion is held invalid, the remainder of the waiver will continue in full force and effect. I further agree that the venue for any legal proceeding shall be in the State of South Carolina.

Medical Treatment/Evaluation Release: Your signature below authorizes a representative of "The Ripken Experience" in Myrtle Beach, South Carolina, to evaluate and treat participants for his/her complaint, injury, condition, symptom, or illness. The medical personnel at "The Ripken Experience" are first aid responders only and will treat/evaluate injuries, conditions, symptoms, or illnesses appropriately and recommend further medical attention as necessary.

For parents / legal guardians of participants of minority age (under 18 years of age at the time of this registration)

This is to certify that I, as parent/legal guardian with legal responsibilities for this participant have indeed read the Agreement above and I agree, for myself, my heirs, assigns, and next of kin, to release and hold harmless and waive subrogation to The Ripken Experience and Extra Bases, LLC and all others from any and all liabilities incident to my minor child's involvement or participation in these outlined activities or programs as provided above, even if arising from ordinary negligence, to the fullest extent permitted by law.

I affirm that I have read and fully understand the content of The Ripken Experience, Extra Bases, LLC Parental Waiver and Release of Liability and Indemnification Agreement and am freely signing this agreement, and that I am giving up my legal rights and/or remedies which may be available to me for the ordinary negligence of The Ripken Experience and Extra Bases, LLC or any of the parties listed above.

Team Name

Name/date of tournament

1. _____ Print Name of Coach	_____	_____
	SIGNATURE of Coach	Date
2. _____ Print Name of Coach	_____	_____
	SIGNATURE of Coach	Date
3. _____ Print Name of Coach	_____	_____
	SIGNATURE of Coach	Date
4. _____ Print Name of Coach	_____	_____
	SIGNATURE of Coach	Date

1. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
2. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
3. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
4. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
5. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
6. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
7. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
8. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
9. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
10. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
11. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
12. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
13. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
14. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date
15. _____ Print Name of Player	_____	_____	_____
	Print Name of Parent/Guardian	SIGNATURE of Parent/Guardian	Date