SUMMER CONTINUATION BASEBALL WAIVER:

I/We, the parents/guardians of the below-named candidate for a position on a Summer Continuation Baseball League team, hereby give my/our approval to participate in any and all Summer Continuation Baseball activities, including transportation to and from the activities.

I/We know that participation in baseball or softball may result in serious injuries and protective equipment does not present all injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold harmless the Local Little League, Little League Baseball, Incorporated, the organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.

I/We will furnish a certified birth certificate of the below-named candidate upon request of any Summer Continuation Baseball League Official.

Participant:	Birthdate
Parental/Guardianship:	date
Please Print:	