

**Lakes of the Four Seasons Girl's Softball Association
2012 Season**

WAIVER OF LIABILITY AND PERMISSION TO PARTICIPATE

I hereby agree that the Lakes of the Four Seasons POA, Girls Softball League, managers and/or coaches will not be held responsible for any injury incurred while participating in the LOFS Girls Softball Association.

I have also been made aware that my child, participating in the sales of fundraising candy, is responsible for the collection of money from sales and indebted to the LOFS Girls Softball League for the full amount, if applicable.

I am being advised at this time the LOFS Girls Softball Association has an internet site, which posts team information, rankings, player's information, and other related "limited information." The South Lake County Crosstown Association, along with other leagues which LOFS Girls Softball may be involved with, also maintain websites that may contain similar likenesses and limited information on my child. I hereby give permission for my child's picture or likeness and information to be allowed on the websites, to be used in a tasteful and respectable manner. I also have the right for my child's picture and/or information to be removed immediately from the website upon providing a written request to the LOFS Girls Softball Executive Board.

I understand that insurance carried by the Lakes of the Four Seasons Girls Softball League, as required by the NSA, is strictly supplemental. I, as parent or legal guardian, am responsible to provide primary carrier coverage for my own child.

Having read the above information and having full understanding of its intent and meaning, I hereby agree to the above and give permission for my child,

to participate in the LOFS Girls Softball program, and I, as a parent or guardian, accept Full Responsibility.

Parent/Guardian Signature: _____

Date: _____

Phone # _____

Registration Board member Witness Signature:

Date:
