



## AMSA/USSSA Under 18 Legal Liability Waiver

You must read and accept the following terms and conditions in order for your registration to be processed:

I agree that prior to participating, I will inspect the facilities and equipment to be used, and if believe anything is unsafe, I will immediately advise my captain, coach or supervisor of such condition(s) and refuse to participate.

I acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. I further acknowledge and fully understand that there may be other risks not known to us or not reasonably foreseeable at this time.

I assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.

I release, waive, discharge and covenant not to sue USSF/USSSA/AMSA, their affiliated clubs and teams, their respective administrators, directors, agents, coaches, captains and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, City of Austin, Travis County, and any other owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releases", from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.

**NOTE: Proof of age (copy of driver's license or government-issued photo ID) must accompany the signed waiver, and must be submitted via email to the AMSA Administrator by 4 PM on the Friday before the next scheduled game day before the player's registration can be activated.**

Player Name: \_\_\_\_\_  
(PLEASE PRINT)

Date of Birth (month/day/year): \_\_\_\_\_ Zip Code \_\_\_\_\_

Team / Division: \_\_\_\_\_

\_\_\_\_\_  
Player Signature Date

Parent/Guardian Name: \_\_\_\_\_  
(PLEASE PRINT)

\_\_\_\_\_  
Parent/Guardian Signature Date