

OCEE PARK BUDDY BALL PROGRAM
CONSENT, RELEASE AND WAIVER OF LIABILITY



Player Name: _____ Date of Birth: _____

Parents' Names: _____ Primary Doctor: _____

Address: _____ Telephone: _____

Telephone: Home: _____

Work: _____ Dentist: _____

Cell: _____ Telephone: _____

Emergency Contact: _____ Insurance Co.: _____

Telephone: _____ Policy No.: _____

Date of Last Tetanus Toxoid: _____ Allergies: _____

Additional Medical Information: _____

In case of emergency, I hereby authorize _____ to be treated
(Player's name)

by another doctor, dentist or emergency medical personnel who is available if my child's doctor/dentist (as noted above) cannot be reached.

I, the parent or legal guardian of the above-named child who will be participating in Ocee Park's Buddy Ball™ Program, hereby give my approval and consent for his/her participation in any and all Buddy Ball Program activities. I assume all risks and hazards incidental to and associated with participation by the above-named child in the Buddy Ball Program, including, without limitation, transportation to and from all Buddy Ball Program activities, falls, contact with other participants or equipment, effects of weather, equipment failure, and condition of playing area. I fully understand that it is my responsibility to ascertain if the activity in which the above-named player is participating contains other elements of risk that could prove harmful to the player. Having read this Consent, Release and Waiver of Liability, and in consideration of acceptance of entry into the Ocee Park Buddy Ball Program, I, and anyone entitled to act on my behalf, waive, release, absolve, indemnify and agree to hold harmless Ocee Park, Ocee Park Athletic Association, Inc. ("OPAA"), the Board of Directors of OPAA, the City of Johns Creek Department of Recreation and Parks, and any and all persons associated with or participating in the Ocee Park Buddy Ball Program, including, without limitation, the Program's coordinators, nurses, managers, coaches, sponsors, and helpers/buddies, from all claims and liabilities of any kind arising out of or incidental to the participation by the above-named player in the Ocee Park Buddy Ball Program.

Name: _____

Parent or Legal Guardian (Please Print)

Signature: _____

Date: _____