

I hereby authorize the staff of the Rich Amaral Baseball Camp to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release the camp and its instructors from any and all liabilities from any injuries or illnesses sustained while at camp. I further understand that attending a camp of this kind can be dangerous. Drills and playing situations that are used will create the danger of being struck by batted or thrown balls. I accept full responsibility for my camper's medical bills, and all other associated expenses as a result of injuries or illnesses sustained while in attendance. I have no knowledge of any physical impairment that would be affected by my camper's participation in the camp program. I also understand the camp retains the right to use for publicity and advertising purposes photographs of campers taken at camp. We reserve the right to decline any application. Credit certificates will be issued for all refunds and rainy days. No cash refunds.

Signature _____ Date _____

Name of Insurance Company _____ Policy # _____