IN CONSIDERATION of being permitted to participate/use, in any way, the Dunigan YMCA Batting Cage, I, for myself for personal representatives, assigns, heirs, and next of kin, and on behalf of my son/daughter and/or team members:

Acknowledge, agree, and represent that I understand the nature of such activities and that I am qualified, in good health, and in proper physical condition to participate in this designated activity, as well as, oversee team member participation in this designated activity.

I represent to the YMCA that I and/or my child and/or team members are physically fit to perform those activities which he/she may undertake with the YMCA and that I am solely responsible for all health risks associated with such activities.

I understand that the YMCA recommends that I and/or my child be examined by a physician prior to engaging in activities with the YMCA. I acknowledge that the YMCA, including its employees, are not licensed medical practitioners, and that their advice is therefore limited in scope and is not a substitute for medical supervision and/or advice. I acknowledge that I, my child’s and/or team members attendance and participation, at the YMCA (or with the YMCA off campus), in activities and programs, including without limitation his/her use of the YMCA’s equipment and facilities, I hereby assume all risks of personal injury, death, property loss or other damages which may result from or arise out of attendance at or use of the YMCA and or its equipment in any programs or activities with the YMCA. I understand that the foregoing waiver of liability shall apply to any and all claims against the YMCA, and/or its owners, shareholders, officers, directors, employees, agents or affiliates (collectively, “YMCA Affiliates”) for any such personal injuries, property loss or other damages connected to or arising out of any of the afore said risks.

I hereby on behalf of myself, child and/or team members, fully and forever release and discharge the YMCA, and YMCA affiliates, from any and all claims, damages, demands, rights of action or causes of action, present or future, known or unknown, anticipated or unanticipated, resulting from or arising out of my and/or my child’s attendance at or use of the YMCA or their participation in any YMCA activities or programs, including those which arise out of the negligence of the YMCA and/or its affiliates. Further, I hereby release and discharge the YMCA and its affiliates from any and all loss, or theft of, or damage to personal property, including without limitation to automobiles and contents on host property.

Standard Form of Release
For valuable consideration, I hereby irrevocably consent to and authorize the creation, use and reproduction by the YMCA and/or its agents working on their behalf, of any and all photographs and/or videos taken of me, my child and/or team members. All negatives and videos shall constitute YMCA property, solely and completely.

I waive the right to approve, or inspect the photographs, videos, advertising copy or printed materials in conjunction therewith. The YMCA does, however, agree to only use such materials in context of good taste, and in compliance with usual and customary social mores.

I hereby warrant that I have read this agreement in its entirety before signing, and I fully understand its contents therein. I further warrant that I am of legal age and competent to contract in my own name as far as the above is concerned.

[PLEASE PRINT & SIGN BACK]
<table>
<thead>
<tr>
<th>NAME OF RENTAL CLIENT</th>
<th>DOB</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET ADDRESS</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
<tr>
<td>HOME PHONE</td>
<td>CELL PHONE</td>
</tr>
<tr>
<td>EMERGENCY CONTACT</td>
<td>EMERGENCY PHONE</td>
</tr>
<tr>
<td>DATE</td>
<td>SIGNATURE</td>
</tr>
</tbody>
</table>

**E-MAIL ADDRESS REQUIRED**

**E-MAIL ADDRESS**

---

I authorize the YMCA to contact me regarding YMCA programs, memberships and special events. By using this registration form you agree to indemnify and hold harmless the YMCA and its officers from claim or liability arising out of any injury as a result of my participation in YMCA programs & activities. You will also comply with the philosophy of the YMCA. The YMCA reserves the right to revoke this registration for any reason deemed valid by the YMCA.

1. **1st PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

2. **2nd PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

3. **3rd PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

4. **4th PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

5. **5th PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

6. **6th PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

7. **7th PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

8. **8th PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

9. **9th PARTICIPANT NAME**
   - AGE, SEX AND GRADE
   - SCHOOL

10. **10th PARTICIPANT NAME**
    - AGE, SEX AND GRADE
    - SCHOOL

11. **11th PARTICIPANT NAME**
    - AGE, SEX AND GRADE
    - SCHOOL

12. **12th PARTICIPANT NAME**
    - AGE, SEX AND GRADE
    - SCHOOL