



**PARENT / CUSTODIAN CONSENT
ST. FRANCIS OF ASSISI BATTING CAGE
WAIVER, RELEASE & INDEMNIFICATION**

I hereby give my permission, consent and authorization for the individual listed below ("the Participant") to utilize the St. Francis of Assisi Batting Cage ("the Batting Cage").

In consideration of the St. Francis of Assisi Athletic Association's acceptance of the Participant's use of the Batting Cage, I do hereby, for myself and the Participant, our heirs, our executors, our administrators, and anyone claiming by or through me or any of them, waive, release and forever discharge the St. Francis of Assisi Parish, the St. Francis of Assisi Athletic Association, the St. Louis Catholic Archdiocese, the Catholic Church and the Catholic Youth Council, and their respective pastors, officials, officers, directors, board members, lay directors, managers, coaches, assistant coaches, employees, volunteers, agents, guests and invitees ("the Releasees") for and from any and all claims, causes of action, losses, liabilities, damages, costs, or the like, on account of, relating to or arising out of injury to the Participant (including death) or injury to his/her/my property, tangible or intangible, which I or the Participant might otherwise have against the Releasees arising out of or relating to the Participant's use of the Batting Cage, including, but not limited to, any claims or rights which may be associated with or attributed to any negligent act(s), omission(s) or fault of any of the Releasees ("the Waived Risks").

I further agree to indemnify, defend, save and hold harmless the Releasees from any claim or loss to which they may be subjected arising out of or relating to the Participant's use of the Batting Cage, including but not limited to, those relating to the Waived Risks. I understand that taking batting practice in the Batting Cage is not without risk, and that certain activities may cause injury to the Participant, and even death. I voluntarily assume these risks, including the Waived Risks.

Participant's Name

Parent's / Custodian's Signature

Date

