



**Youth ages 8-12  
years old**

**Kurt Suzuki - All Pono Baseball  
Clinic**

Saturday, January 14, 2017  
9:00am - 1:00pm  
Iron Maehara Baseball Stadium

**2017 PLAYER REGISTRATION  
FORM**

(Please PRINT Clearly)



For Office use only:

**Space is Limited**

**CONTACT  
INFORMATION:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School Attending: \_\_\_\_\_ Sex:  Male  Female

Parent/Guardian's Name & Ph #: Name: \_\_\_\_\_ Ph# \_\_\_\_\_

Name: \_\_\_\_\_ Ph# \_\_\_\_\_

Email address for confirmation: \_\_\_\_\_

**MEDICAL INFORMATION:**

Physician's Name: \_\_\_\_\_ Physician's Phone: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

Person Picking up Player: \_\_\_\_\_ Relationship: \_\_\_\_\_

**REGISTRATION INFORMATION:**

Shirt Size: Youth Size \_\_\_\_\_ **OR** Adult Size \_\_\_\_\_ Position: \_\_\_\_\_

**Clinic is for youth ages 8 -12 years old and limited to the first 150 registrations.**

**REGISTRATION INSTRUCTIONS:**

Send the completed Registration Form **and** Liability Waiver to:  
833 Mahealani Street, Kihei, HI 96753 or email to: [suzukiallponoclinic@gmail.com](mailto:suzukiallponoclinic@gmail.com)  
For more information please call 264-1718.

You will be contacted with registration confirmation.

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT  
and PHOTOGRAPH RELEASE

IN CONSIDERATION of the permission and privilege granted by the COUNTY OF MAUI, KURT & RENEE SUZUKI, KURT SUZUKI FAMILY FOUNDATION and ALL PONO (hereinafter referred to as "Organizers") to \_\_\_\_\_, a minor child whose date of birth is \_\_\_\_\_ (hereinafter referred to as "Participant"), to participate in the KURT SUZUKI - ALL PONO BASEBALL CLINIC (hereinafter referred to as the "Activity"), said Activity to take place at the Maehara Baseball Stadium on Saturday, JANUARY 14, 2017, the undersigned parent or guardian (hereinafter referred to as "Parent") agrees as follows:

1. Parent acknowledges and understands that the Activity may involve physical contact and may result in bodily injury to Participant or property damage. Parent further acknowledges and understands the risks associated with Participant's participation in the Activity and is fully aware that there may be unforeseen risks associated with Participant's participation in the Activity.
2. Parent shall release, waive, discharge, and covenant not to sue the Organizers, their officers, employees, agents, and servants (hereinafter referred to as "Releasees") from any and all losses, liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by Participant or any property belonging to Participant, whether caused by the negligence of Releasees, or otherwise, during Participant's participation in the Activity, or while in, on, or upon the area where the Activity is being conducted.
3. Parent agrees, in consideration for the privilege of Participant's participation in the Activity, to allow Organizers to take photographs/video of Participant and Participant's property, along with the right to copyright, use, alter and publish the photographs. Organizers may use said photographs/video for any lawful purpose with or without Parent or Participant's further consent. Parent further releases Organizers from all claims or liability related to said photographs/video.
4. Parent further shall indemnify and hold harmless the Releasees from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to Participant's participation in the Activity, whether caused by the negligence of the Releasees or otherwise.
5. Parent confirms that Participant is covered by medical insurance that is sufficient to cover any medical expense that may be incurred due to Participant's participation in the Activity or by Participant's presence in, on, or upon the area where the Activity is being conducted.
6. In signing this Release, Parent acknowledges and represents that Parent has read the foregoing Waiver of Liability and Hold Harmless Agreement, understands it and signs it voluntarily as Parent's own free act and deed; no oral representation, statement or inducement, apart from the foregoing written agreement, have been made; Parent is at least eighteen (18) years of age and fully competent; and Parent executes this Release for full, adequate and complete consideration fully intending to be bound by same.

In witness whereof, the undersigned has executed this Waiver of Liability and Hold Harmless Agreement on this \_\_\_\_\_ day of \_\_\_\_\_ 201\_\_\_\_.

Parent/Guardian:

\_\_\_\_\_

\_\_\_\_\_

(Print Name)

(Signature)

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_