

ACME BASEBALL CONGRESS

Release of Liability Form

This statement has been issued by ACME Baseball Congress Board of Directors and will be held with the ACME Baseball Congress Secretary.

The undersigned parent and/or guardian of _____ agrees not to hold the ACME Baseball Congress, Inc., Board of Trustees, Officers, Commissioner, Assistant Commissioner, and any other persons affiliated with ACME BASEBALL Congress, liable for any accidents or injuries to my youth that may occur during practice, league or tournament play. We the undersigned player and parent/guardian each agree to adhere to all rules and regulations set forth by ACME Baseball Congress, Inc., Ohio High School Athletic Association. We understand by our signature that we will carry our own Health, Vehicle or any other insurance that is deemed necessary for our youth to participate and that we do not hold ACME Baseball Congress, Inc., its Board Of Directors, Officer, Commissioner, Assistant Commissioners or any other persons affiliated with ACME Baseball Congress, inc. responsible.

TEAM NAME: _____

COACH NAME: _____

DISTRICT: _____

Signature of Parent and/or Legal Guardian

Signature of Player

Printed Name

This form **MUST** be turned into your Coach and subsequently turned into thre Secretary of ACME Baseball Congress, Inc. **by June 1 or the player will be not be eligible to participate in the ACME Program.**