



**Event Waiver:**

In accordance with Bobby Barbier Baseball Camps, I hereby give my consent for the camper listed below to participate in the activities of the camp, to include the specific sports activities and recreational activities conducted at the camp. The undersigned camper and parent/guardian understand that the camper will engage in physical activity during the program, which contains an inherent risk, indemnities, and release Bobby Barbier Baseball Camps, its officers, Directors, Agents, and Employees from any and all liability for personal injury arising out of the camper's participation in the Camp program. If at any time it is necessary for the camper to receive outside or professional medical attention, I hereby give my consent to the camp to secure services and arrange transportation if deemed necessary.

- **Medical Conditions:**

Please list any medical conditions that we need to be aware of:

\_\_\_\_\_

Camper: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Online Signature of Parent/Guardian: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Date: \_\_\_\_\_