

## WAIVER AND PERMISSION FORM

### *Participant Information:*

**First Name:** \_\_\_\_\_ **M.I.** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Gender:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

### *Event Information:*

**Name of Event:** \_\_\_\_\_ **Event Date:** \_\_\_\_\_

**Activities:** \_\_\_\_\_

In consideration of your being permitted to participate in the Event and Activities referred above, wherever the Event and/or Activities may occur, you hereby attest that, after reading this Waiver and Permission Form completely and carefully, you acknowledge that participation in the Event/Activity by you is entirely voluntary, and that you understand and agree as follows:

**PHYSICAL CONDITION/MEDICAL AUTHORIZATION:** I hereby certify that I am physically fit for participation in the event and/or the activities specified above or other activities conducted in conjunction therewith (the “*Event/Activity*”) and have the skill level required in conjunction with the Event/Activity, and I have not been advised otherwise. I agree that before I participate in any activity conducted in conjunction with the Event/Activity, I will inspect the related facilities and equipment. In connection with any injury sustained or illness or medical conditions experienced during my attendance in connection with the Event/Activity, I authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by the attending medical personnel if I am not able to act on my behalf. Additionally, I authorize medical treatment for me, at my cost, if the need arises; however, I acknowledge that the Released Parties shall have no duty, obligation or liability arising out of the provision of, or failure to provide, medical treatment. For the purposes hereof, the “Released Parties” are

**BIG LEAGUE TALENT, LLC** and its respective parent, subsidiary, affiliated or related companies, including, without limitation the officers, directors, employees, agents, contractors, sub-contractors, representatives, successors, assigns and volunteers of each of the foregoing entities.

**EQUIPMENT AND FACILITIES INSPECTION:** I will immediately advise the Event Manager of any unsafe condition that I observe. I will refuse to participate in the Event/Activity until all unsafe conditions observed by me have been remedied.

**PUBLICITY RIGHTS:** I further grant the Released Parties the right to photograph and/or videotape me and further to display, use and/or otherwise exploit my name, face, likeness, voice and appearance forever and throughout the world, in all media, whether now known or hereafter devised, throughout the universe in perpetuity (including without limitation, in online webcasts, on television including broadcasts on sports related platforms, in motion pictures, films, newspapers, and magazines) and in all forms including without limitation, digitized images, whether for advertising, publicity, or promotional purposes, including, without limitation, publication of Event/Activity results and standings, without compensation, reservation or limitation, or further approval and I agree to indemnify and hold harmless the Released Parties for any Claims associated with such grant and right to use. The Released Parties are however, under no obligation to exercise any rights granted herein.

**GOVERNING LAW:** This Waiver and Permission Form shall be governed by the laws of the State of New Jersey and any legal action relating to or arising out of this Waiver and Permission Form shall be commenced exclusively in the Superior Court of New Jersey, Monmouth Vicinage (or if such Court shall not have jurisdiction over the subject matter thereof, then to such other sitting in such country and having subject matter jurisdiction) **AND I SPECIFICALLY WAIVE THE RIGHT TO TRIAL BY JURY.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name of Participant

\_\_\_\_\_  
Signature of Participant or  
Parent/Guardian if under  
age 18