

LEBANON YOUTH BASEBALL HITTING FACILITY RULES AND REGULATIONS

..ALL PARICIPANTS (COACHES AND PLAYERS) MUST HAVE A WAIVER ON FILE.

..LYB HITTING FACILITY IS A SCHEDULED FACILITY. FAILURE TO FOLLOW THE FACILITY RULES OR USE OF THE FACILITY OUTSIDE OF APPROVED SCHEDULE WILL RESULT IN COACH, PLAYER OR TEAMS LOSS OF PRIVILEGES.

..ONLY COACHES AND PLAYERS ARE ALLOWED INSIDE THE CAGES AND HITTING AREAS.

..NETTING IS NOT ALLOWED TO BE MOVED

..NO FOOD, SEED, GUM ,CHEW, TOBACCO PRODUCTS,OR DRINKS ARE ALLOWED (OTHER THAN BOTTLED WATER)

..NO CLEATS OR SPIKES ALLOWED ,CLEAN TURF OR TENNIS SHOES ONLY.

..HELMETS MUST BE WORN IN CAGES OR SOFT TOSS AREA. CATCHERS IN SQUATTING POSITION MUST HAVE MASK ON.

..NO SWINGING BATS OUTSIDE OF CAGES AND PLAYERS WAITING NEED TO BE 3 FEET FROM CAGES.

..LEBANON YOUTH BASEBALL IS NOT RESPOSIBLE FOR LOST OR STOLEN ITEMS OR DAMAGED PROPERTY

..BEGIN CLEANING UP 5 MINUTES BEFORE THE END OF YOUR TIME SLOT AND PICK UP ALL TRASH. LAST TEAM OUT IS TO MAKE SURE LIGHTS ARE OFF AND LOCKS ARE SECURE.

RELEASE AND WAIVER

IN CONSIDERATION OF MY USE OF THE FACILITY PROVIDED BY LEBANON YOUTH BASEBALL(LYB) I/WE DO HEREBY RELEASE LYB ITS EMPLOYEES, AGENTS, OWNERS HEIRS AND SUCCESSORS IN INTEREST FROM ANY AND ALL LIABILITY, CAUSE OF ACTION, DAMAGES, CLAIMS OR DEMANDS OF EVERY NATURE THAT MAY ARISE FROM MY USE OF THE LYB FACILITY. THIS RELEASE AND WAIVER COVERS ALL INJURIES, DAMAGES AND CAUSES OF ACTION, WHETHER KNOWN OR NOT, OR WHICH MAY DEVELOP FROM THE USE OF THE FACILITY OR THE ACTIVITIES OCCURRING WITHIN THE FACILITY.

THIS RELEASE AND WAIVER IS SIGNED FREELY AND VOLUNTARILY. IT SHALL BE BINDING ON THE UNDERSIGNED, HIS/HER HEIRS, PARENTS, GUARDIANS, AGENTS, ASSIGNS, AND ANY OTHER PERSON WHO SEEKS OR MAY SEEK TO BRING A CLAIM, CAUSE OF ACTION, OR DEMAND ON MY BEHALF AGAINST LYB OR ITS AGENTS, EMPLOYEES OR ASSIGNS. I/WE ACKNOWLEDGE THAT I/WE HAVE READ AND UNDERSTOOD THIS RELEASE AND WAIVER AND AGREE TO ITS TERM AND CONDITIONS. THIS IS A RELEASE AND WAIVER PLEASE READ CAREFULLY BEFORE SIGNING.

DATED THIS _____ DAY OF _____ PARTICIPANTS NAME (PRINT) _____

PARICIPANTS SIGNATURE

PARENT OR GUARDIAN FOR PARTICIPANT

WITNESS