



**WAIVER FOR PARTICIPANT:** In consideration of your accepting this entry, I, \_\_\_\_\_  
Hereby for myself, my child, my heirs, executors and administrators, waiver and release any and all  
right and claims for damages I or my child may have while participating in a Alta Vista/Dwight  
Baseball Commission program or sport. I assume all risks and hazards incidental to participation and  
I waive, release, resolve, indemnify and agree to hold harmless the Alta Vista/Dwight Baseball  
Commission, The City of Alta Vista, The City of Dwight, USD 417 and any organizers, sponsors,  
coaches and supervisors. **I, also, as a parent and/or coach will abide by the SPORTSMANSHIP  
CODE. This code is fully supported by the Alta Vista/Dwight Baseball Commission. NOTE:  
Parent or Legal Guardian must sign for any child entering a program.**

Signed: \_\_\_\_\_ Print Name: \_\_\_\_\_

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

**DO NOT RETURN THIS FORM TO THE SCHOOL  
FORMS MUST BE RETURNED WITH PAYMENT TO ALTA VISTA CITY HALL OR  
DWIGHT CITY HALL NO LATER THEN MARCH 25th**

Alta Vista City Hall	Dwight City Hall
521 Main Street	612 Main Street
P.O. Box 44	P.O. Box 157
Alta Vista, KS 66834	Dwight, KS 66849

**\*\*\*MAKE CHECKS PAYABLE TO ALTA VISTA BASEBALL COMMISSION\*\*\*  
Venmo also available @AltaVista-Baseball**