



GEORGIA STARS TRYOUT FORM

PLAYER'S NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

BIRTHDATE _____ AGE _____ GRADE (2021-2022 SEASON) _____

CURRENT SCHOOL _____

PRIMARY POSITION _____ SECONDARY POSITION(S) _____

NUMBER OF YEARS PLAYED TRAVEL BALL _____

LAST TEAM _____

FATHER'S NAME _____ HOME _____ CELL _____

MOTHER'S NAME _____ HOME _____ CELL _____

FATHER'S EMAIL _____

MOTHER'S EMAIL _____

LIST ANY MEDICAL PROBLEM OR PROHIBITION PLAYER HAS _____

PERSON TO NOTIFY IN EMERGENCY _____ EMERGENCY TELEPHONE _____

The participant does for himself. his legal representatives, successors and assigns, covenant not to sue the Georgia Stars Baseball Academy (GSBA), its legal representatives, successors and assigns for any claims, demands, actions causes of action, debts, sums of money, suits, damages, responsibilities and liabilities of whatsoever kind arising out of any injury which may be sustained by the undersigned while participating in any recreational activities of whatsoever kind (hereinafter referred to as the "Activities") on the Facilities managed by the GSBA, located at its commonly known address of 4525 S. Berkeley Lake Rd. Norcross, GA 30071

The undersigned does himself. his legal representatives, successors and assigns, agree to indemnify the GSBA, its legal representatives, successors and assigns, and hold the GSBA, its legal representatives, successors and assigns, harmless from any and all liabilities, claims, demands, suits, actions, causes of action, charges, damages, fees or any other legal proceeding brought or made against the GSBA and/or its legal representation, successors and assigns arising out of or related in any way to, and acts. neglect or omissions, of GSBA, or its guest or others while the undersigned is participating in any activity which may be reasonably related to the Activities on said facilities.

he undersigned does himself, his legal representatives, successors and assigns, agree to pay any and all loss, damages (actual and exemplary), cost, expenses, invoices and bills, including attorneys' fees, incurred regardless of whether paid by GSBA, its legal representatives, successors and assigns as a result of such claims set forth herein above.

I acknowledge that my or my child's participation in activities at GSBA is voluntary. I hereby certify that I'm over 18 years of age, I have read and agree to all the above terms and conditions. I am aware that by signing this agreement I assume all risks and waive and release all substantial rights that I may have and possess.

SIGNED _____ PARENT OR GUARDIAN