

2012 Good Land Baseball TOURNAMENT
Liability Release Form and Roster Waiver

The undersigned Manager or Head Coach of the Participating Baseball Team below hereby acknowledges and affirms the following:

Team Name:

Manager/Head Coach Full Name:

Contact Phone Number and Address:

Team Email Address:

“I have chosen to participate in a baseball Tournament hosted exclusively by Full Count Fundamentals, LLC. These Tournament games include but are not limited to running, hitting, throwing, sliding and other, strenuous physical activity that may cause permanent injury and or death to participants. Accordingly, I affirm that all of the Participants have no physical ailments or medical conditions that will be aggravated by participating in such activities. Understanding the foregoing, I assume full and absolute responsibility for any and all risks related to the players involvement in such activities and I hereby fully and absolutely release The Lester A. and Viola S. Foundation for Girsh Park and Full Count Fundamentals, LLC, a California limited liability company, its managers, members, agents and affiliates from any and all liability, including active negligence, arising from the Participant’s involvement in these tournament games.

I have read and completely understand the foregoing. This document along with any others I have or will execute to effect the engagement with Full Count Fundamentals, LLC, constitute the full and entire agreement between me, the Participating Team and Full Count Fundamentals, LLC. No oral statements different than or in addition to the terms of these documents were made to me or the Participants and there are no agreements other than the written words contained therein. ALL QUESTIONS REGARDING THE TOURNAMENT HAVE BEEN ANSWERED TO MY SATISFACTION.”

Manager or Head Coach of Participating Baseball Team Signature:

Date _____

2012 Good Land Baseball Tournament Registration Form

Age Division is determined by the actual age on May 1, 2012. This age is upheld through August 31, 2012.

Send check payable to Full Count Fundamentals, LLC in the amount of \$475.00. Refunds for cancellations, weather, emergencies and all other reasons are at the complete discretion of Tournament Officials. Proof of Team Liability Insurance must be provided to League Officials. Copies of Official Birth Certificates must be available for every player on Roster Form.

Send All Documents including Liability Release Form, League Registration and payment in the amount of \$475.00 to FCF Baseball at 7050 Phelps Rd. Goleta CA 93117. Roster can be updated up to Start Date and official Roster Form must be presented for Check In.

TEAM NAME _____ TOURNAMENT DATE _____

AGE DIVISION _____ MANAGER NAME _____

CONTACT INFO

NAME: _____ PHONE NUMBER: _____

ADDRESS: _____ CITY: _____

STATE: _____

For more information or help with tournament details, accommodations, or directions please contact 805-453-2027 or play@goodlandbaseball.com