

**Hagerstown Area Church Softball League**

**WAIVER FORM**

I, \_\_\_\_\_, the parent of the minor child known as,  
\_\_\_\_\_ will not hold the Hagerstown Area Church  
Softball League, nor officers, nor representatives liable for injuries, accidents, or  
damages occurring at games.

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Coach Signature

\_\_\_\_\_

Date

Name of Church/Team: \_\_\_\_\_