



GAME CHANGER INDOOR

1106 Carroll Street • Pawnee, IL 62558 • 217-625-7272

www.gamechangerindoor.com • www.facebook.com/GameChangerIndoor

Manager's Name: _____

Team: _____ Coach: _____

Address: _____

City _____ State: _____ Zip: _____

Email Address: _____

Contact Phone: _____

TEAM SCHEDULING INFORMATION

Scheduled Times/days: _____

Zone/Zones: _____

Pricing: _____

Payment required prior to first session of each month

We will pay the charges that are due on our account in advance of participation. Payments for full contracted time reflect requested schedule and number of weeks selected. Cancellations made before contracted time is completed results in final billing of fees associated with early cancellation equal to the difference in price for time scheduled and time used. In the event a responsible party fails to make payment or perform the covenants herein received of responsible party, responsible party agrees to pay in addition received hereby all costs of collection including all attorney fees and court costs incurred by Game Changer Indoor as a result thereof. I/We agree to said stated prices and subsequent pricing increases thereafter. I/We agree to pay for additional packages/me that incurs an invoice from Game Changer Indoor.

Printed Name: _____ Signature: _____

PARTICIPATION WAIVER AND RELEASE OF LIABILITY

November 2020

In consideration of Game Changer Indoor, LLC, an Illinois Limited Liability Company ("GCI") furnishing services, facilities and/or equipment to enable me to participate in indoor baseball and softball training activities (collectively, the "Activities"), I agree as follows:

I fully understand and acknowledge that: (a) risks and dangers exist in my use of indoor baseball and softball training facilities and equipment and my participation in the Activities; (b) my participation in the Activities and/or use of such facilities and equipment may result in my injury or illness including but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, eye injury, blindness, heat stroke, heart attack, other ailments that could cause serious disability or death; (c) these risks and dangers may be caused by the negligent acts or omissions of the owners, employees, officers, members, managers or agents of GCI, the negligent acts or omissions of participants, the negligent acts or omissions of others, reckless acts, intentional acts, accidents, breaches of contract, forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; and (d) by my participation in the Activities and/or use of the facilities and/or equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, members, managers, employees of GCI, or any other person, including without limitation, unintentional and intentional acts.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to and hereby effectively do release, waive, discharge, hold harmless, defend and indemnify GCI and its owners, agents, officers and employees from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of indoor baseball and softball training equipment or my participation in the Activities. I specifically understand that I am releasing, discharging and waiving any claim or actions that I may have presently or in the future for the acts or other conduct by the owners, agents, officers or employees of GCI.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXONERATE AND RELIEVE THE FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER ACT OR OMISSION.

Printed Name: _____ Age: _____ Date of Birth: _____

Signature: _____