

# Personal Lesson Waiver

**Waiver:** I hereby release Rick Saggese from any and all liability resulting from injury, illness, or death suffered by my child in connection with these baseball/softball personal lessons. Should my child suffer from an injury or from an illness, I authorize Rick Saggese to use his discretion to have my child transported to a medical facility, and I take full responsibility financial and otherwise for this action.

I represent that my child is in good physical condition and able to participate in all instruction and drills. I agree that Rick Saggese is not responsible for lost or stolen property.

Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_

Medical: Is participant on medication?

Yes      No

Allergic?      Yes      No

If yes, describe:

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

\_\_\_\_\_  
Signature (Parent or Guardian)

\_\_\_\_\_  
Parent/Guardian's Name Printed

\_\_\_\_\_  
Name of Player(s)