

# Youth League Team Bus Trip Waiver

## Participant Information

Participant Name:

Date of Birth:

Parent/Guardian Name:

Emergency Contact Number:

## Bus Trip Details

Date of Trip:

Destination:

## Waiver and Release

By signing below, I acknowledge that participation in the Youth League Team bus trip involves potential risks including, but not limited to, injury and property loss. I hereby waive, release, and hold harmless the Youth League, its organizers, volunteers, employees, and agents from any and all liability for any harm, injury, or loss that may befall the participant during transportation to and from, or participation in, team activities on this trip.

I certify that my child is physically fit for participation and I grant permission for them to receive necessary emergency medical treatment if required.

Parent/Guardian Signature:

Date:

