

CYCLONES TRANSPORTATION LIABILITY WAIVER FORM

I hereby give my consent for my son to drive his private vehicle to the Sioux Falls Cyclones baseball tournament in _____ on _____. I knowingly and voluntarily release, acquit, discharge and waive, and further agree to indemnify, hold harmless and reimburse the Sioux Falls Cyclones from and against any claim which I, my child or any other parent, relative or next of kin of ours, successors, or assigns or any other person, firm or corporation may now or hereafter have or claim to have, known or unknown, seen or unforeseen, directly or indirectly, or within or without the control of those released, and also all claims which said minor has or hereafter may acquire, either before or after my son has reached the age of majority, for or on account of any losses, damages, personal injuries, pain and suffering, death, property damage, contract claims, or negligence resulting from, or arising out of, directly or indirectly, during, or in connection with my son's driving his private vehicle to the upcoming baseball tournament.

I certify that my son can be expected to drive in a responsible manner and will adhere at all times to applicable Cyclones policies as well as state and federal laws and regulations. I further certify that both the driver and vehicle are insured, and the vehicle has been favorably inspected for safety per state regulations, and that no smoking will be allowed. I understand that, in the event of an accident or loss, the insurance covering my son's private vehicle provides the primary insurance coverage on the vehicle and its occupants.

I understand that it is my responsibility to notify the Sioux Falls Cyclones to revoke or change this permission at any time.

I hereby give my permission for _____ to be transported as stated in this form.

(Parent/Guardian) (Date)

Approved by: