



# GRAPEVINE BASEBALL • SOFTBALL ASSOCIATION

## Emergency Authorization

Division \_\_\_\_\_ Team \_\_\_\_\_

I, the parent or guardian of a player (named below) in Grapevine Baseball Softball Association hereby grant permission to the adult manager, coach, business manager or team parent of his/her team to obtain medical care from any licensed physician, hospital, medical clinic or doctor of dentistry for the player named below at such time as either the parent or legal guardian cannot be contacted in person or by telephone. This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of player. This authorization shall include all league activities, including the period required to travel to and from those activities. I do hereby waive, release, absolve, indemnify and agree to hold harmless the Grapevine Baseball Softball Association, its Board, league officials, organizers, supervisors, participants and persons transporting the player to and from activities, from any claim arising out of an injury to the player.

1.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
2.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
3.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
4.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
5.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
6.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
7.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
8.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
9.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
10.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
11.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
12.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
13.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date
14.	_____	_____	_____
	Print Child's (Player's) Name	Parent Signature	Date