

同意書 / Letter of Consent (Waiver Form)

I, the undersigned, acknowledge and fully understand that, as a participant in this Softball Competition to be held at Kelley Park (Field 1 / Field 3) 404 Victory Farm Drive, Gaithersburg, MD 20877, on May 18, 2025, I will be engaging in activities that involve risk of serious injury, including permanent disability or death, and severe social and economic losses which might result not only from my own actions, inactions or negligence but also from actions, inactions or negligence of others or the conditions of the premises or any equipment used. Further, I acknowledge and fully understand that there may be other risks not known to us or not reasonably foreseeable at this time. I assume all foregoing risks and accept personal responsibility for the damages resulting from such injury, permanent disability or death. I hereby release, discharge, indemnify and hold harmless Japan Commerce Association of Washington DC (including their directors, officers and employees) against any and all liability, loss, cost, claim or damage whatsoever, arising as a result of my own (or my child's) participation in this Softball Competition.

I, the undersigned, have read and fully understand the above waiver/release and sign it below voluntarily.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

If the participant(s) is/are under 18 years of age, parent or guardian must read and sign below:

I, the undersigned, am the legal guardian of the above minor(s) listed in the Registration Form and have read and fully understand the above waiver/release. I hereby consent to the terms of the waiver/release on behalf of the named minor(s) and give my consent for their participation in this Softball Tournament on the terms stated above.

<Participant>

Name: _____

<Participant's Parent/Guardian's>

Name: _____ Signature: _____ Date: _____

<Participant>

Name: _____

<Participant's Parent/Guardian's>

Name: _____ Signature: _____ Date: _____

<Participant>

Name: _____

<Participant's Parent/Guardian's>

Name: _____ Signature: _____ Date: _____

IMPORTANT: Every participant is required to submit a signature.