MH PITCHING — PITCHING CAMP

Participant Waiver, Release, Indemnity, and Medical Authorization

Please print clearly, complete every section, initial where indicated, and sign at the end. One form per participant. You can also sign online at mhpitching.com/camp.html.

Event and Participant Information

Event *MH Pitching Camp*

Organizer *MH Pitching*

Dates *December 21–22, 2026*

Location *Mike E. Sansone Park, Plant City, Florida*

Participant full name _____

Date of birth / age _____

Throws (circle): Right / Left _____

Team or league _____

Parent/guardian name _____

Relationship _____

Cell phone _____

Email _____

Address _____

City / State / ZIP _____

1. Notice to the Minor Child's Natural Guardian

Required form under Florida Statutes § 744.301(3)

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF MH PITCHING, ITS OWNERS, COACHES, INSTRUCTORS, STAFF, AND VOLUNTEERS, AND THE CITY OF PLANT CITY USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM MH PITCHING, ITS OWNERS, COACHES, INSTRUCTORS, STAFF, AND VOLUNTEERS, AND THE CITY OF PLANT CITY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND MH PITCHING, ITS OWNERS, COACHES, INSTRUCTORS, STAFF, AND VOLUNTEERS, AND THE CITY OF PLANT CITY HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

Parent/guardian initials _____

2. The Activity and Its Inherent Risks

The camp includes warm-ups, stretching, throwing and long-toss, pitching mechanics instruction, bullpen sessions, fielding drills, conditioning, and the use of balls, weighted balls, bands, nets, mounds, and other training equipment. It takes place outdoors at a public park and may move to another location for weather.

I understand that pitching and baseball/softball activities carry risks that are a natural part of the activity, including:

- Being struck by a thrown, batted, or deflected ball, a bat, or other equipment
- Collisions with other participants, coaches, nets, fences, or fixed objects
- Slips, trips, and falls on mounds, turf, dirt, grass, uneven ground, or wet surfaces
- Muscle strains, sprains, fractures, and dislocations

- Overuse and throwing injuries to the shoulder, elbow (including UCL injury), wrist, back, and legs
- Heat exhaustion, heat stroke, dehydration, and sunburn in Florida weather; lightning and sudden storms
- Insect stings and bites, allergic reactions, and contact with wildlife or plants at an outdoor park
- Concussion and other head, eye, and dental injuries
- In rare cases, serious injury, paralysis, or death

I understand these risks cannot be fully eliminated even when the Released Parties use reasonable care.

Parent/guardian initials ☐

3. Assumption of Risk, Release, and Indemnity

In this form, the **"Released Parties"** are MH Pitching, its owners, members, coaches, instructors, employees, staff, and volunteers, and the City of Plant City (owner of Mike E. Sansone Park) and its officials, employees, and agents.

1. **Voluntary participation.** My child is participating voluntarily, with my permission. I have read the risks above and I understand them.
2. **Assumption of inherent risks.** On behalf of my child and myself, I knowingly assume all risks inherent in the activity described above.
3. **Release for my child's inherent-risk claims.** On behalf of my child, as permitted by Florida Statutes § 744.301(3), I release and waive any claim against the Released Parties for personal injury, including death, or property damage that results from the inherent risks of the activity.
4. **Release of my own claims.** For myself, my spouse, heirs, and estate, I release the Released Parties from any claim I may have arising from my child's participation, **including claims caused by the ordinary negligence of the Released Parties**, to the fullest extent Florida law allows. This includes claims for medical expenses and loss of my child's services.
5. **Covenant not to sue.** I agree not to sue the Released Parties on any claim this form releases.
6. **Indemnity.** To the fullest extent Florida law allows, I agree to defend, indemnify, and hold harmless the Released Parties from any claim, demand, or lawsuit, including reasonable attorneys' fees and costs, brought by me, my child, or anyone acting for either of us, that arises from my child's participation and is not released by this form, except to the extent caused by a Released Party's gross negligence or intentional misconduct.
7. **What this form does not cover.** Nothing in this form releases any Released Party from liability for gross negligence or intentional misconduct.
8. **Readiness to participate.** I confirm my child is physically able to take part and has no condition that makes participation unsafe, except as I list in the medical section. I will tell staff if my child reports pain, especially in the arm or shoulder.

Parent/guardian initials ☐

4. Medical Authorization

Medical treatment authorization. If my child is injured or becomes ill and I cannot be reached right away, I authorize MH Pitching staff to provide or arrange first aid and to call emergency medical services. I consent to emergency transport and to treatment by licensed medical providers they consider necessary. I agree to pay all costs of that care.

I understand MH Pitching staff are coaches, not medical professionals, and do not diagnose or treat injuries beyond basic first aid. I have listed all allergies, medical conditions, medications, and recent injuries that staff should know about, and I will update MH Pitching before camp if anything changes.

Emergency contact _____ Relationship _____

Emergency phone _____ Alternate phone _____

Allergies (food, medication, insect) _____

Medical conditions (asthma, diabetes, heart, seizures, etc.) _____

Medications / inhaler or EpiPen brought _____

Recent injuries, arm pain, or surgeries _____

Health insurance provider and policy # (optional) _____

Adults authorized to pick up the participant _____

Parent/guardian initials ☐

5. Health and Safety Rules

1. **Removal for safety.** MH Pitching may stop or limit my child's throwing, or remove my child from activity, for signs of a possible concussion, arm pain, illness, heat illness, or any other safety concern. A child removed for a suspected concussion may not return to activity at camp without written clearance from a licensed health care provider. A child removed for any other reason may not return that day unless a parent or guardian agrees after speaking with staff.
2. **Supervision, drop-off, and pick-up.** MH Pitching supervises participants only during scheduled camp hours, which are sent by email before camp. MH Pitching is not responsible for my child before check-in or after the end of each day. My child will be released only to me or an adult I list as an authorized pick-up. I will pick up my child on time.
3. **Rules and conduct.** My child will follow the instructions of MH Pitching staff and the facility rules. MH Pitching may remove a participant whose behavior is unsafe or disruptive, without a refund.
4. **Equipment and belongings.** My child will bring a glove, athletic shoes or cleats, water, and any protective gear MH Pitching recommends. MH Pitching is not responsible for lost, stolen, or damaged personal items.
5. **Weather.** MH Pitching may delay, shorten, move, or cancel activities for heat, lightning, storms, or other conditions it considers unsafe.

Parent/guardian initials ☐

6. Payment, Refunds, and Cancellations

1. **Fee.** The camp fee is $100 per participant when paid from a bank account, or $104 when paid by card. A spot is held only after the fee is paid.
2. **Cancelling by the deadline.** If I cancel in writing (email or Instagram message to MH Pitching) by **11:59 p.m. Eastern on Monday, December 14, 2026**, I will receive a refund of the amount I paid minus a $5 processing fee.
3. **After the deadline.** After that deadline the fee is not refundable. Before camp starts, I may transfer my child's spot to another eligible player by telling MH Pitching in writing; that player's parent or guardian must sign this waiver.
4. **No refund for attendance or removal.** There is no refund or credit for no-shows, late arrival, early departure, missed sessions, injury or illness during camp, or removal under the rules above.
5. **Weather or cancellation by MH Pitching.** If MH Pitching delays, shortens, or moves activities, there is no refund. If MH Pitching cancels a full camp day, it will reschedule that day or give a credit toward a

future MH Pitching program, at its choice. If MH Pitching cancels the entire camp and does not reschedule it, I will receive a full refund.

6. **Payment disputes.** I agree to contact MH Pitching to resolve any billing question before disputing a charge with my card issuer.

Parent/guardian initials ☐

7. Photo and Video Release

I allow MH Pitching to photograph and record my child during the camp, including video for mechanics analysis, and to use those images in its instruction, website, advertising, and social media without payment. MH Pitching will not post my child's last name with an image. If I check the box below, MH Pitching may still record my child for coaching purposes but will not use images of my child publicly.

☐ Check here if you do NOT allow photos or video of your child to be used publicly.

8. Electronic Signature and General Terms

1. **Electronic signature.** If I sign this form electronically, I agree that my typed name, initials, and checked boxes are my legal signature under Florida's Uniform Electronic Transaction Act (Florida Statutes § 668.50) and the federal E-SIGN Act, and have the same effect as a handwritten signature. MH Pitching may keep this form electronically; I may request a copy at any time.
2. **Governing law and venue.** Florida law governs this form. Any lawsuit about it or about my child's participation must be filed in the state courts in Hillsborough County, Florida.
3. **Duration.** This form applies to the camp dates above, any rescheduled dates, and any make-up session for this camp.
4. **Severability.** If any part of this form is found unenforceable, the rest stays in effect, and the unenforceable part is limited only as much as needed.
5. **Entire agreement.** This form is the full agreement about my child's participation and replaces any earlier statements. I am not relying on any promise not written here.

9. Signature

I HAVE READ THIS ENTIRE FORM, INCLUDING THE NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN. I UNDERSTAND IT, AND I AM SIGNING IT VOLUNTARILY. I AM 18 OR OLDER AND THE PARENT OR LEGAL GUARDIAN OF THE PARTICIPANT, WITH THE AUTHORITY TO SIGN FOR THE PARTICIPANT.

Parent/guardian signature _____ Date _____

Printed name _____ Relationship to participant _____

Participant acknowledgment (optional, ages 10 and up): I will follow my coaches' instructions, play safely, and tell a coach right away if my arm hurts or I feel sick.

Participant signature _____ Date _____

For MH Pitching use only Received by: _____ Date: _____ Paid: ☐ Yes ☐ No Form version 2026-11-11