

Topeka Queens Softball

Insurance Waiver

Player _____

It is our understanding that the Topeka Queens Softball Organization coaches and administrators will not be held liable, assume responsibility or obligation for any medical bills or debts resulting from any injury to the above named player while practicing or playing in any practice session, scrimmage, game or contest.

We have: _____ We don't: _____ have private insurance for our daughter.

Name of Insured: _____

Name of Insurance: _____

Policy Number: _____

Group Number: _____

Signature(s) of Parent or Legal Guardian

Signature(s) of Parent or Legal Guardian

Date