PARTICIPANT RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

READ BEFORE SIGNING

MATT DUFFY BASEBALL ACADEMY, LLC

Participant Name				
In consideration of being allowed to part	rticipate in	any way in the pro	gram, related events and	d activities,
I, the undersigned, acknowledge, appre	ciate, and	agree that:		
 There is a risk of injury from the I KNOWINGLY AND FREELY ASSUFROM THE NEGLIGENCE OF THE participation. I willingly agree to comply with significant hazard during my presuch to the attention of the nea I, for myself, and on behalf of mandal selection of the nead applicable, owners and lessors of losses, and liability arising out or damage or property, WHETHER the fullest extent permitted by It. I, as parent/guardian with legal unrestricted right to reproduce illustration, advertising, in any mandal selection. 	the terms esence or parest officially heirs, associated by heirs, associated by heirs as a second by heir associated by heirs as a second by heir associated by heir associate	and conditions for poarticipation, I will real immediately. SSS THE MATT DO yees, other particips used to conduct the dot and INJURY, DISTROM THE NEGLIGER	own and unknown, EVEN sume full responsibility for participation. If I observe the move myself from part of known and a suffer BASEBALL ACT of the event, from any and a suffer of THE RELEASEES of the document and agreed to images for the purpose	for my e any unusual cicipation and bring kin, HEREBY CADEMY, LLC, sers, and , if all claims, demands, y suffer, or loss or OR OTHERWISE, to
I HAVE READ THIS RELEASE OF LIABILITY TERMS, UNDERSTAND THAT I HAVE GIV VOLUNTARILY WITHOUT ANY INDUCEN	'EN UP SUE			
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Participant's Signature	Age	Date		
This is to certify that I, as parent /guard his/her release as provided above of all and agree to indemnify and hold harmle involvement of participation in these prextent permitted by law.	the Releasess the Rel	sees, and, for mysel easees from any an	lf, my heirs, assigns, and all liability incidents to	next of kin, I release my minor child's
Х				
Parent/Guardian Signature	Emergency Phone #		Date	