D. C. C. C.		1
Participants Information:	Finat Nome	Middle Teiriel
Last Name	First Name	Middle imital
Street AddressState	Zip	Phone
Parent's/Guardian's Name		Date
(FOR PROMOTIONAL NOTICES) Email		
Waiver of Liability and Release for use of the facilities at Coaches Athletic		
I hereby acknowledge and agree that participation in the warehouse facilities located within Coaches Athletic LLC, has inherent risks. In consideration of the services provided by Coaches Athletic LLC, their agents, officers, participants, consultants, employees, and all persons or entities acting on their behalf (hereinafter referred to as Coaches Athletic LLC) I now agree and certify as follows:		
involve risk of serious injury which mi the actions, inactions, or negligence of that there may be other risks not known limited to: nature of the activity, latent Coaches Athletic LLC, or other entity; Athletic LLC; my own physical condit	ght result not only from others or the conditions or not reasonably for s or apparent defects of c acts of other participant ions, acts or omissions;	, the participant (if participant is 18 years nor participant, will be engaging in activities that may my own actions, inactions, or negligence, but from of the premises or of any equipment used. Further, eeable at the time. The risks may include, but are not onditions in equipment or property supplied by the s in this activity, employees or agents of Coaches conditions of the Coaches Athletic LLC facility and ir use; first aid emergency treatment or other services.
	in spite of the risks, to I	s existing in the activity. My participating in this participate. I assume all the foregoing risks and accept
3. On behalf of myself, my children, my parents, my heirs, assigns, personal representatives I hereby voluntarily release, waive, forever discharge, and agree to indemnify and hold harmless the Coaches Athletic LLC, and each of their respective commissioners, directors, agents, and other employees, its parent, subsidiaries, affiliates, employees, distributors, and agents, other batting cage participants, and, if applicable, operator or lessors of premises used to conduct the event/activity, from any and all liability for any and all claims, demands of causes of action which are in any way connected with my participation in this activity or my use of the Coaches Athletic LLC equipment or facilities.		
4. I further understand that I am legally re Coaches Athletic LLC, or private, publ		my child, including, but not limited to, any damage to
5. I hereby certify that I have read and am conditions set forth therein.	a familiar with the Facili	ties Rules and Regulations and will comply with
and I agree My child and I will wear a	helmet at all times whi Iminister basic First Aid	parent or legal guardian of the participant under 18, le in the warehouse facility. I hereby provide the and I authorize the Coaches Athletic LLC or its nel as needed.
the activity a court of law may find me	to have waived my rig	rt, or property is damaged during participation in that to maintain a lawsuit against the Coaches 3 above on the basis of any claim from which I
I HAVE HAD SUFFICIENT OPPORTUNITY TO READ THE ENTIRE DOCUMENT. I HAVE READ AND UNDERSTOOD IT, AND I AGREE TO BE BOUND BY ITS TERMS.		
Participant Signature or Parent/Guardian if participant is under age 18		
Print Name of Signatory		Date