

**DAN DUQUETTE SPORTS ACADEMY**

**ACCIDENT WAIVER AND RELEASE OF LIABILITY FOR ADULTS AND COACHES**

By enrolling the in the Dan Duquette Sports Academy, I represent and ensure that I am at least eighteen (18) years of age, and that I am physically and mentally able to participate in all of the Academy's activities and have been examined by a licensed medical physician within one (1) year prior to attending the Academy. I understand that the Dan Duquette Sports Academy, DDD Baseball, LLC, The DDD Nominee Trust, their shareholders, members, directors, officers, trustees, employees, volunteers, advisors, representatives, independent contractors, agents, assigns, and the property on which the Academy is located cannot be held responsible in whole or in part for any accidents, illness or injuries resulting in medical or dental expenses incurred by me from participation in any of the Academy's programs or activities. I hereby release each of the above named parties from and against any and all claims, costs, liabilities and injuries incurred by me while at the Academy, or while participating in any activities of or related to the Academy. I agree to assume full and complete responsibility for any and all medical bills arising from my participation in the activities of the Academy, and hereby agree to indemnify and hold the aforementioned parties harmless from any and all liability associated with my participation at the Academy or in Academy functions, including all costs and fees incurred by the aforementioned parties.

By signing this Wavier and Release agreement, I acknowledge that I HAVE READ AND FULLY UNDERSTAND AND AGREE TO ALL OF ITS TERMS AND CONDITIONS, INCLUDING THE PERMISSION TO TREAT AGREEMENT AND OTHER RELATED DOCUMENTS PRESENTED TO ME BY THE DAN DUQUETTE SPORTS ACADEMY PRIOR TO ENGAGING IN ANY ACTIVITIES AT THE ACADEMY. I further state that I have executed this waiver and release voluntarily and with full knowledge of its significance to be binding on me, my heirs, executors, administrators and assigns.

I hereby accept the terms above stated:

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Signature

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Print Name