



## Waiver/Indemnification

### PLEASE READ AND ACKNOWLEDGE ON THE WEBSITE

I hereby authorize Kiddie Sportz Programs, LLC ("KiddieSportz") to bill according to the payment option above. If acceptable, I authorize Kiddie Sportz to deduct tuition payments directly from the credit card or checking account provided in the terms of this agreement.

My child has no physical, mental or emotional illness that could impair his/her participation or could make participation injurious. While every effort will be made on the instructor's part to make the events and facilities as safe as possible, I realize that any physical activity has the potential for injury and I waive any claim of accidental and/or negligent tort damage against Kiddie Sportz, your child's school, its principles, officers, or instructors, as a result of the activity.

I also release Kiddie Sportz from any liability arising from my use of any and/or all equipment provided by Kiddie Sportz.

Parent or legal guardian must sign below before acceptance into program. As parent/legal guardian of the child named herein, I hereby represent that the child has been deemed physically fit by his/her pediatrician to participate in tennis/golf instructions. I understand that there are inherent risks in participating in these athletic programs.

I hereby accept responsibility for and agree to pay any and all costs of medical treatment resulting from any injury suffered by my child as a result of his/her participation in the tennis/golf instructions. I understand that all enrollments are final and no refunds will be issued once payment is made and classes commence.

I further agree to indemnify and hold harmless KiddieSportz.com and any to their coaches from any and all liability, damage, cost or expense arising out of my child's participation of every kind and nature.

In the event that I cannot be reached in an emergency, I hereby give permission for the care to be administered by KiddieSportz.com staff, EMT, physician / staff of hospital or any other qualified individual to provide medical treatment deemed necessary for my child. As well, I give permission to communicate with me via text and email and to take pictures and/or videos of my child for advertising and marketing purposes.

I hereby acknowledge an assumption of risk by accepting and agreeing to allow my child to participate in a Tennis Program.