



Private Hitting Lessons Application

Instructor: Dan Kopitzke

Name _____ Date of Birth _____

Athlete's Email _____ Cell Phone (16 and over) _____

Home Address _____

Team/League(s) _____

Graduation Year _____

Father's name _____ Email _____

Mobile Phone _____ Work Phone _____

Mother's name _____ Email _____

Mobile Phone _____ Work Phone _____

We were referred / recommended to you by the following people:

I have read and understand the information and policies concerning one on one instruction at the K-Zone Academy.

Parent's signature _____ Date _____

Athlete's signature _____ Date _____

Complete the following sentence: I would know I was a successful hitter if I could...

*To the Parent and the Athlete: What are your basic expectations from the lessons?
In essence, what do you expect from Coach? What do you see as his primary responsibilities?*

K-ZONE ACADEMY

737 Center Street, Apex, NC 27502

WAIVER of Liability, Assumption of Risk and Indemnity Agreement

Waiver: In consideration of being permitted to use, today and on all future dates, the property, facilities, staff, equipment and services of K-Zone Academy, I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue K-Zone Academy, its directors, officers, employees, and agents from liability from any and all claims including the negligence of K-Zone Academy, resulting in personal injury, accidents or illnesses, and property loss arising from, but not limited to, participation in activities, classes, observation, and use of facilities, premises or equipment.

Assumption of Risks: Physical activity, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. K-Zone Academy has facilities for and provides for activities such as strength and agility training, baseball and softball skill sessions, camps and clinics. Some of these involve strenuous exertions of strength using various muscle groups, some involve quick movements involving speed and change of direction, and others involve sustained physical activity which places stress on the cardiovascular system. The specific risks vary from one activity to another, but the risks range from minor injuries to severe injuries.

Indemnification and Hold Harmless: I also agree to indemnify and hold K-Zone Academy HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney’s fees brought as a result of my involvement at K-Zone Academy and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of North Carolina and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Parent/Guardian of Minor

Date

Signature of Participant

Participant’s Age (if Minor) _____