

## DYB, INC. TOURNAMENT COACH REPLACEMENT AFFIDAVIT



THIS IS TO CERTIFY THAT			
coach in the			
team will be unable to continue participation in the 2025 tou	rnament season for t	he following reaso	on:
I hereby approve the replacement of		bv a	new coach.
			,
Name	f coach being replaced)		
		Ctata	7:- Codo
Address, City			_ ZIP Code
I hereby certify that the new coach is an adult representing of	our DYB or DYS franc	nised league.	
Signature			
(League President or League Represen	itative as registered with L	DYB or DYS)	
ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEM	INIFICATION AGREEN	MENT FOR REPLAC	EMENT COACH
In consideration of my participation as a manager or coach of a State, or World Series Tournaments, related events and activities,			<del>-</del>
1. The risk of injury to me from the activities involved in these progrand death, and while particular rules, equipment, and personal diamd,	<del>-</del>	= :	
2. The risk of possible exposure to and illness from infectious disections COVID-19. While particular rules and personal discipline may reduce			
3. I knowingly and freely assume all such risks, both known and unk RELEASEES or others, and assume full responsibility for my participation.		FROM THE NEGLIGE	NCE OF THE
4. I willingly agree to comply with the program's stated and custom and protection against infectious diseases; and,		ns for participation	including risk of injury
5. I HEREBY RELEASE AND HOLD HARMLESS DYB Inc.; DYB or DY tournament host; their respective directors, officers, officials, agents sponsors, advertisers, and if applicable, owners and lessors of prer ANY AND ALL ILLNESS, INJURY, DISABILITY, DEATH, or loss or dan programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELE	, employees, volunteers mises used to conduct t nage to person or prop	, other participants, the event ("Released erty incident to my	sponsoring agencies, es"), WITH RESPECT TO participation in these
6. I HEREBY INDEMNIFY AND HOLD HARMLESS all the above Release programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest		-	participation in these
Signature of new coach:	Da	te:	
COMMISSIONER, STATE DIRECTOR, NATIONAL DIRECTOR O	R DISTRICT DIRECTOR	<u>R</u>	
In my opinion, this is an acceptable coach according to the DV	YB, Inc. (DYB or DYS) I	Rules and Regulati	ons.
Replacement as requested above is hereby approved:		_	
Date	Title		