



DYB, INC.
TOURNAMENT COACH REPLACEMENT AFFIDAVIT

THIS IS TO CERTIFY THAT _____, a
coach in the _____ League, # Y-_____ of a []6U []8U []10U []12U
tournament team will be unable to continue participation in the 20_____ DYB tournament season for the following
reason:

I hereby approve the replacement of _____ by a new coach,
(Name of coach being replaced)

Name _____

Address _____, City _____ State _____ Zip Code _____

I hereby certify that the new coach is an adult representing our DYB franchised league.

Signature _____
(League President or League Representative as registered with Dixie Youth Baseball, Inc)

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT FOR REPLACEMENT COACH

In consideration of my participation as a manager or coach of a team in the DYB Sub District, District, Area, Regional, State, or
World Series Tournaments, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. The risk of injury to me from the activities involved in these programs is significant, including the potential for permanent disability
and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does
exist; and,
2. The risk of possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and
COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
3. I knowingly and freely assume all such risks, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE
RELEASEES or others, and assume full responsibility for my participation; and,
4. I willingly agree to comply with the program's stated and customary terms and conditions for participation including risk of injury
and protection against infectious diseases; and,
5. I HEREBY RELEASE AND HOLD HARMLESS DYB Inc.; DYB State and District Affiliates; my local team and league; tournament
host; their respective directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors,
advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND
ALL ILLNESS, INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my participation in these
programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
6. I HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my participation in these
programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

Signature of new coach: _____ Date: _____

COMMISSIONER, STATE DIRECTOR, NATIONAL DIRECTOR OR DISTRICT DIRECTOR

_____ is in my opinion an acceptable coach according to the DYB Rules and
Regulations. Replacement as requested above is hereby approved: Signature _____
Date: _____ Title _____

The original replacement form will be retained by the District Director. A copy of this form must be attached to the original Tournament Team Affidavit.