



**BIG LEAGUE DREAMS SPORTS PARK
UMPIRE/REFEREE INDEPENDENT CONTRACTOR AGREEMENT
AND ACKNOWLEDGEMENT AND ASSUMPTION OF RISK, RELEASE AND WAIVER**

I acknowledge that entering and using the Big League Dreams Sports Park (the "Sports Park") carry risks. The risk to have contact with individuals who have been exposed to and/or have been diagnosed with one or more communicable diseases, including but not limited to Covid-19 or other medical conditions, diseases, or maladies does exist, and it is impossible to eliminate the risk that I could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease. Further, I acknowledge that umpiring or refereeing games can result in injury to me and others, including as a result of the intentional wrongdoing of players or spectators. For and in consideration of the right to umpire or referee at the Sports Park, I knowingly and voluntarily assume these and all other risks and hereby (a) release Big League Dreams _____, LLC; Big League Dreams USA, LLC and all of its subsidiary entities; the City of _____; [insert name of tournament promoter/host or USSSA if league play]; and the officers, managers, members, directors, employees, elected officials, sponsors, advertisers, volunteers and agents of any of the foregoing (collectively the "Released Parties") from or with respect to any and all premises or other liability from any cause whatsoever (including, without limitation, negligence in rendering, or not rendering, medical or emergency aid) and for any and all loss of life, bodily injury, property damage and/or other loss I or my minor children may suffer or incur in, about or en route to or from the Big League Dreams Sports Park premises, whether or not any such loss is caused in whole or in part by the action, inaction or negligence of any Released Party; and (b) waive any and all rights I or they may have to make a claim against or to sue any Released Party for any such loss of life, injury, damage or other loss. I authorize representatives of the Sports Park to obtain emergency treatment for me in the event of injury or illness. I understand that the Sports Park does not maintain health, medical or disability insurance for my benefit and that I will be responsible for the cost of any medical services incurred by me unless I obtain my own insurance. I understand and agree that I shall at all times be an independent contractor by my furnishing umpiring or refereeing services at the Sports Park for games scheduled at mutually agreeable times; that no employment relationship exists between me and any Released Party; that I am solely responsible for the payment of income and any other taxes on the per game independent contractor payments I receive; and that I am free to provide umpiring or refereeing independent contractor services to other organizations. This Agreement supersedes any prior written or oral agreements I may have had with any Released Party respecting umpire or refereeing services at the Sports Park. If any provision hereof is found to be invalid or unenforceable, such determination shall not invalidate or render unenforceable any other provision of this Agreement.

PRINT NAME _____

SIGNATURE _____ **DATE** _____