

Addendum C

RELEASE OF LIABILITY
Online Courses Offered by DSD PT Consulting PLLC

DSD PT Consulting PLLC ("DSD") offers online virtual courses ("DSD Courses") which are designed for licensed physical and occupational therapists and other professionals which provide training and instruction on physical therapy, rehabilitative and manual therapy, exercise and strength training, and such other topics relating to pediatric incontinence and pelvic floor dysfunction, as DSD may determine from time to time.

By enrolling in this DSD Course, I hereby represent, acknowledge and agree to the following:

I represent that I am a qualified participant in this DSD Course which is designed for licensed physical and occupational therapists, physical therapist assistants or certified occupational therapist assistants.

This DSD Course is for educational and informational purposes only and does not constitute medical advice. Content in this DSD Course is not intended to be a substitute for professional medical advice, diagnosis, or treatment.

In consideration for receiving the instruction provided by this DSD Course, I hereby waive and release DSD, its owners, agents, employees, and contractors, and agree to reimburse and hold such parties harmless, from any and all liability, claims, damages, actions and causes of action whatsoever, for loss, damages, or injury to person or property, irrespective of how arising and however caused, including but not limited to all kinds, degrees, and extents of negligence (other than willful or gross negligence) of DSD, its owners, agents, employees, and contractors, whether directly or indirectly related to such training and instruction presented through this DSD Course, or the facilities and equipment used by me to access the DSD Course.

I UNDERSTAND AND AGREE THAT THIS RELEASE AND WAIVER OF LIABILITY CONSTITUTES A COMPLETE WAIVER OF MY RIGHT TO SUE AND COLLECT DAMAGES FROM DSD PT CONSULTING PLLC, AND ITS OWNERS, AGENTS, EMPLOYEES, AND CONTRACTORS, REGARDLESS OF WHETHER ANY OF SUCH PARTIES ACTED NEGLIGENTLY.

I hereby acknowledge and agree that this Release of Liability and all other aspects of my relationship with DSD, whether contractual or otherwise, are all governed by the laws of the State of Colorado, without application of the conflict laws provisions thereof. I hereby consent to the jurisdiction of the courts of the State of Colorado located in Arapahoe County, Colorado as the sole forum for resolving issues relating to this Release of Liability. If any portion of this Release of Liability is found by a court of competent jurisdiction to be invalid or unenforceable, then I acknowledge and agree that the remaining terms and conditions of this Release of Liability shall remain in full force and effect to the fullest extent permitted by applicable law.

I recognize that the instruction I will receive through this DSD Course does not constitute essential services and that I could obtain similar services elsewhere. I represent that no special relationship exists between me and DSD and that I am under no physical, economical, or other compulsion to sign this Release of Liability. I acknowledge that the instruction that I will receive from DSD through this DSD Course is sufficient consideration for signing this Release of Liability.

I UNDERSTAND AND AGREE THAT THIS RELEASE OF LIABILITY RELEASES DSD PT CONSULTING PLLC, AND ITS OWNERS, AGENTS, EMPLOYEES, AND CONTRACTORS FROM ANY LIABILITY FOR ANY FAILURE BY ANY SUCH PARTY TO USE REASONABLE CARE IN ANY WAY. I RECOGNIZE AND UNDERSTAND THAT THIS IS A RELEASE OF ALL CURRENT AND PROSPECTIVE CLAIMS, AND I HAVE READ THIS RELEASE OF LIABILITY BEFORE INDICATING MY AGREEMENT BELOW.

שם ושם משפחה _____ תאריך _____ חתימה _____