

PARTICIPANT PERMISSION/WAIVER FORM

Name of Participant (Please Print) _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Parent E-Mail _____

Print names of parent(s) and/or legal guardian(s) _____

Age of participant _____ Date of Birth _____ School _____

FUNCTIONS AND ACTIVITIES

It is my understanding that participating in the Camp and its activities is a privilege. Prior to participation in such activities, I acknowledge that there are certain risks associated with the activities, including, by way of example, physical injury due to activity-related accidents, illness, or even death. In addition, I acknowledge that there may be other risks inherent in these activities of which I may not be presently aware.

RELEASE OF LIABILITY AND INDEMNIFICATION

By signing the Permission/Waiver Form, I expressly warrant and represent that the above-named child is capable of withstanding both the physical and mental demands of the activities in this Camp. I expressly assume all risks of the above-named child participating in the activities, whether such risks are known or unknown to me at this time. I further release this Camp, and its coaches and participating staff from any and all claims and liability that my child may have now or that my child may have in the future as a result of injury, illness, or property damage incurred during the course of the above-named child's participation in the activities of this Camp. This Release of Liability shall include, without limitation, any claims of negligence, whether active or passive, or breach of warranty. Further, it is understood that no warranty is made with regard to the above-named child's participation in this Camp. This Release of Liability also extends and is intended to cover any and all claims that the above-named child's family or members of the undersigned's family, their estate, heirs, representatives, or assigns may have against this Camp or its coaches and participating staff.

The undersigned further agrees to indemnify, defend and hold harmless this Camp, its coaches and participating staff from and against any and all claims, debts, demands, damages, (including direct, liquidated, consequential, incidental or other damages), judgements, awards, losses, liabilities, interest, attorneys' fees, costs and expenses of whatsoever kind or nature at any time arising from the above-named child's participation in the various activities and programs, or as a result of injury or illness of the above-named child during such activities. I hereby waive any claims due to the active or passive negligence of the coaches, staff, assistant coaches, and any other persons associated with the Let It Fly Drills & Skills Camp.

FIRST AID AND EMERGENCY MEDICAL TREATMENT

The undersigned recognizes that there may be a need or occasions where the above-named child may be in need of first aid or emergency medical treatment as a result of an accident, illness, or other health condition or injury. The undersigned hereby gives permission for coaches of this Camp to seek and secure any needed medical attention or treatment for the above-named child, including hospitalization, if in the coaches' opinion, after being duly advised by authorized medical personnel, such need arises. By agreeing to the treatment of the above-named child, I agree to pay all fees and costs arising therefrom, including surgery, and any other necessary medical treatment for the above-named child. I expressly give permission for attending physician(s) and other medical personnel to administer any necessary medical treatment for the above-named child.

ENTIRE AGREEMENT

This Participant Permission/Waiver Form represents the entire agreement of the above-named child, the undersigned, the coaches, and the Camp with respect to the subject matter herof, and is an integration of those Parties' agreement and no agreement representations, oral or otherwise, express or implied, with respect to the subject matter hereof have been made by either party which are not set forth expressly in the Participant Permission/Waiver Form.

GOVERNING LAW

The validity, interpretation, construction and performance of this Agreement shall be governed by the laws of the State of Arizona without regard to its conflict of laws or provisions. Further, the parties to this Participant Permission/Waiver Form hereby expressly agree that venue and jurisdiction shall be proper in the Superior Court of Maricopa County, State of Arizona.

I hereby expressly give permission for the above-named child to participate in the activities of this Camp. In consideration for allowing the participation of the above-named child in these activities, I hereby consent to all terms of this Participant Permission/Waiver Form, including the Release of Liability and Waiver and Indemnification provisions herein, on behalf of the above-named child and agree that this Participant Permission/Waiver Form shall be binding upon me, my family, heirs, legal representatives, successors, and assigns.

Signature of Parent/Legal Guardian _____

Date _____

Print name of Parent/Legal Guardian _____