

## Waiver and Release (Summer 2018)

Camper's Name: \_\_\_\_\_

Camp Attending: Lacrosse: Session 1: \_\_\_\_\_ or Session 2: \_\_\_\_\_  
Soccer: Session 1: \_\_\_\_\_; Session 2: \_\_\_\_\_; or Session 3 \_\_\_\_\_  
(fill in the dates of the camp you are attending)

I (Parent, applicant-participant) understand that The College ID Camp and Ultimate Student Athlete Recruiting, all directors and coaches are not responsible for accidents or injuries occurring at camp or during transportation of participants to and from camp resulting in medical, dental or other expenses including the loss of personal items. The camp participant will be held responsible for all property damage that the participant may cause and may be sent home without a refund for violation of camp rules. The applicant must be in good health and be able to participate in the physical activity of a vigorous soccer program. In the event that emergency medical aid/treatment is required due to illness or injury during the camp, it is permissible for The College ID Camp or Ultimate Student Athlete Recruiting to secure and retain medical treatment and transportation if needed. Also, the undersigned individual and/or as parent or legal guardian of the above mentioned child do hereby agree to waive, release and hold harmless The College ID Camp and Ultimate Student Athlete Recruiting and its agents, servants and employees from any and all causes of action including, but not limited to, negligence and property damage.

Print Name of Participant: \_\_\_\_\_

Name of Program: \_\_\_\_\_

Print Name of Parent or Guardian: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_

Parent/Guardian Email Address: \_\_\_\_\_

Date: \_\_\_\_\_