

RELEASE OF LIABILITY FOR MINOR PARTICIPANTS IN SPORTS CAMPS AT JACKSONVILLE STATE UNIVERSITY

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IN CONSIDERATION OF my child/ward,	, being allowed to participate in any way in the Jacksonville State University
Athletics Camps and related events and activities, the undersigned ackr	nowledges, appreciates, and agrees that:

There are risks of injury and illness (ex: communicable diseases such as COVID-19) to my child from the activities involved in the camp, including the potential for injury, permanent disability and/or death, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and.

- 1. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES (as defined below) or others, and assume full responsibility for my child's participation; and,
- 2. I willingly agree to comply with the Camp's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the camp itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,
- 3. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Jacksonville State University; its directors, 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 INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in the camp or related activities, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
- 4. I, for myself, my spouse, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my child or ward's involvement or participation in the Camp, EVEN IF ARISING FROM THEIR NEGLIGENCE to the fullest extent permitted by law.
- 5. I have explained to my child/ward the risks of participation in the camp and his/her responsibilities for adhering to the rules and regulations, of the Camp.
- 6. I hereby certify and agree that I will not send my child to the Camp if he or she: a) has been in close contact within the last **10** days with someone who has had a confirmed case of COVID-19; b) has been diagnosed with an active case of COVID-19; c) has, within the last 48 hours prior to the scheduled camp date experienced any of the following symptoms: cough, shortness of breath, sore throat, fever, a loss of taste or smell, vomiting or diarrhea.

I, FOR MYSELF, MY SPOUSE, AND CHILD/WARD, HAVE READ THIS RELEASE AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of Child/Ward	
Name of Parent/Guardian	
Parent/Guardian Signature	
Date	

UNDERSTANDING OF RISK

I understand the seriousness of the risks involved in participating in this Camp, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

Name of Child/Ward	
Signature of Child/Ward	
Date Signed	