Canton Middle

Volleyball Camp

Release and Waiver of Liability (Please read before signing)

 The undersigned hereby acknowledges that participation in this clinic and related activities involves an inherent risk of physical injury, and the undersigned, on behalf of the registrant, hereby assumes all such risk and does hereby forever discharge the clinic and all employees and agents thereof from any and all liability of whatever kind of nature, arising from and by reason of any and all known and unknown bodily and personal injuries, damage to property, and the consequences thereof, resulting in or involvement with this clinic, including any failure of equipment or default in the premises. If at any time it is necessary for the aforementioned camper to receive outside or professional medical attention, I hereby giver my consent to the clinic to acquire the service of whatever physical or medical facility and to secure whatever transportation is deemed necessary. I hereby state that I am the legal guardian of said child.

Participant Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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