SHANE RICHARDSON FOOTBALL CAMPS

CAMP PARTICIPANTS

RELEASE FOR PERSONAL INJURY AND DAMAGE

All physical activity has risks that may range from a fall, to muscle and ligament damage, to circulatory or heart disorders. Consequently you must make sure that your health is adequate to participate in the strenuous, vigorous physical activity in the FOOTBALL camp. It is your responsibility to check with the physician of your choice about your health status if there is any question regarding your fitness for participation. If you, at any time during your participation, experience any distress or have any questions regarding your fitness for participation, notify your coach or the athletic trainer.

WHEREAS the undersigned is duly aware of the risks and hazards that may arise through participation in said activity and that participation is said activity may result in loss of life or limb, property, or both, of the undersigned.

THEREFORE, it is agreed as follows:

THAT in consideration of being allowed to participate in said activity, the undersigned hereby voluntarily assumes all risks of accident or damage to his/her person or property and all risks of liability or demands of any kind sustained, whether caused by the negligence of the said Shane Richardson Football Camp, its agents or employees, or otherwise; and

THE undersigned further voluntarily agrees that the above release shall be binding upon any heirs, administrators, executors, and assigns, of the undersigned; and,

THE undersigned hereby affirms having accident insurance coverage and having adequate health status to participate in strenuous physical activity. The undersigned further acknowledges that the undersigned has the right to refuse attempt, or to withdraw from, the physical activity for any reason. The undersigned accepts the responsibility to report any injury, distress, preexisting condition that may impair performance, or others problems to the coach or athletic trainer.

THE undersigned, by signing this release, hereby certifies that the undersigned has read and fully understands the conditions herein provided.

PRINT NAME:	DATE:
SIGNED:	