



University of South Alabama

RELEASE FROM LIABILITY

To be completed by participant's parent or guardian. The participant's parent or guardian must sign in space provided below

TO THE UNIVERSITY OF SOUTH ALABAMA:

My son, _____, will be participating in the 2011 Ronnie Arrow's
(NAME)
Boys Basketball Camps to be held _____ at the University of South Alabama.
(DATE)

I understand that travel to and from the Camp is solely my responsibility over which the University has no responsibility or control. I also understand that participation in the Camp is voluntary, and the undersigned and participant are aware of, and agree to abide by the rules and regulations of the Camp.

In consideration for the University of South Alabama permitting my child the opportunity to participate in the aforesaid activity, I, in full recognition and appreciation of any risk inherent in this activity to which my child may be exposed, do hereby agree to assume all of the risk and responsibility surrounding my child's participation in said activity. By my signature affixed below, I agree to hold harmless and indemnify, release and further discharge the University of South Alabama, and all of its trustees, officers, agents, servants, and employees from and against any and all claims, demands and actions or causes of action on account of or resulting from my child's participation in and which may result from causes beyond the control of, and without the fault or negligence of the University of South Alabama, its trustees, officers, agents, servants, and employees during the period of aforesaid Camp.

I affirm that my child is physically able to participate in aforesaid activity and that the University of South Alabama and its trustees, officers, agents, servants, and employees assume and accept no liability for personal injury, loss of life or damage to personal property.

BY MY SIGNATURE AFFIXED BELOW, I have caused this Release to be executed on the _____ day of
(DAY)
_____ 20_____.
(MONTH)

(PARENT / GUARDIAN SIGNATURE)

PHOTOGRAPHIC RELEASE *(Please check one box)*

- I authorize the University of South Alabama Athletics Department to photograph, video, and/or audio tape my child for promotional use.
- I do not authorize the University of South Alabama Athletics Department to photograph, video, and/or audio tape my child for promotional use.

(PARENT / GUARDIAN SIGNATURE)

**** THIS FORM MUST BE RETURNED PRIOR TO PARTICIPATION IN CAMP ****