

Legal Release

I am the parent or legal guardian of _____.

Medical Treatment; Physical Fitness. In case of a medical emergency or medical necessity, I authorize all medical, surgical, and diagnostic procedures for my child as may be preformed or prescribed by a treating physician, until I can be notified. I accept full responsibility for the costs of all medical treatment my child may receive. Furthermore, I certify that my child is physically fit to participate in all camp activities and that he/she is covered by health or accident insurance (required for camp attendance.).

Risks. I am aware that playing soccer and other Soccer Camp activities are vigorous and can involve severe cardiovascular, muscular and skeletal stress. I understand that playing soccer and other Soccer Camp activities involve certain risks, including but not limited to falling, being hit by the ball or other players, muscle strains/sprains, finger, shin, back, knee and other joint injuries, heat exhaustion or thermal stress, hitting or being hit by equipment associated with the camp such as a soccer goal or goal posts, and playing with participants who may be larger, stronger and faster than my child. In addition, I understand that participation in soccer games, practices and other Soccer Camp activities involves activities incidental thereto, including, but not limited to, the possible reckless conduct of other participants which may cause injury to my child. I understand that all stresses and hazards associated with this activity cannot be foreseen. I understand that this camp involves overnight stays on campus and I have made my child aware that he/she is not allowed to leave the premises or supervision of camp personnel at any time during the camp except into my custody.

Release. In consideration of my child participation in, use of the facilities of and the instruction he/she will receive during this camp, I hereby release Seattle University and its trustees, officers, employees, and agents from any and all liability for any injuries, claims, or damages incurred by me, my child, or on behalf of my child arising from, or in connection with, my child's attendance at and participation in the Seattle University Soccer Camp for Boys.

Photography/Video. If Seattle University photographs or makes video recordings of camp events & activities, I hereby grant to Seattle University the irrevocable, assignable, worldwide right and license to use, alter and publish my child's image, alone or together with other images and texts, for university publications and for all other purposes reasonably related to promotion of the university in any manner and in any medium now know or later.

Supplemental Legal Conditions and Release of Claims for Local Transportation

Camp specific local travel. Due to playing field availability and to enhance the participation experience of each camper, university van pool transportation will be provided for select off-campus camp sessions. The university vans are limited to seating 11 passengers and will be operated by university approved drivers.

Risks. I am aware that local van transportation for camp activities imposes certain inherent risks which could pose a risk of serious injury and/or loss of life.

Release. In consideration of my child's participation in and the local transportation she will receive during this camp, I hereby release Seattle University and its trustees, officers, employees, and agents from any and all liability for any injuries, claims, or damages incurred by me, my child, or on behalf of my child arising from, or in connection with, my child's attendance at and participation in the Seattle University Residential Camp.

Name: _____ Parent's Name: _____ Emergency Contact: _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____ (Provide frequently checked addresses)

Club Team: _____ Position: _____ Current School: _____ Graduation Year: _____

Insurance Provider: _____ Policy number: _____

Parent Signature: _____ **Printed Name:** _____ **Date:** _____