Baseball Youth Camp Release and Waiver of Liability – 17 years old or younger

Name of minor child	
(Please print) THIS RELEASE is made and entered into on this day of, 2019, by the unc guardian of MINOR.	dersigned parent or legal
I, the undersigned, certify that I am the parent or legal guardian of the minor whose name appears at the top of "MINOR"). In consideration of MINOR being permitted to be in, or engage in the activity of Baseball Youth Ca Camp") on the Arkansas Tech University Campus, and for other good and valuable consideration, the receipt hereby acknowledged, I do hereby individually, and as parent or legal guardian of MINOR, execute this Releas and on behalf of MINOR, our legal representatives, heirs, relatives, next of kin, and assigns. Individually, and the minor, I hereby forever release, waive, covenant not to sue, and discharge, Arkansas Tech University Trustee members, administrators, faculty, employees, agents, representatives, and/or staff members (I and all liability to MINOR, our legal representatives, heirs and assigns, for any and all loss, claims or damathat may hereafter accrue, resulting from the death or injury to MINOR, whether caused by the active or pof TECH, while MINOR is participating in Athletic Camp.	amp (collectively "Athletic and sufficiency of which is se and Waiver of Liability for as a parent or legal guardian o ty, its officers, Board of hereinafter TECH) from any ages that MINOR may have or
Individually, and as parent or legal guardian of MINOR, I acknowledge that Athletic Camp is a potentially haza as parent or legal guardian of MINOR, I understand that while participating in this activity, the MINOR will be of injury and that although TECH has taken precautions to ensure that safety equipment for the Athletic Camp TECH to guarantee absolute safety. I, individually, and as parent or legal guardian of MINOR, understand that responsibility for safety while participating in the Athletic Camp and I, individually, and as parent or legal guardians assume full responsibility for the risk of bodily injury, death, medical expenses, loss of income, or property dan participating in Athletic Camp whether it is due to the active or passive negligence or otherwise of TECH. I, in guardian of the minor, acknowledge that the MINOR and I have a personal responsibility to follow established fully utilize the safety equipment provided for the Athletic Camp, and to follow the instructions of TECH, if any, Athletic Camp. I, individually and as parent or legal guardian of MINOR, also acknowledge I have been fully at that may be incurred while participating in Athletic Camp, and that while it is impossible to foresee all dang some of the hazards that might occur include cuts, sprains, bruises, fractures, heart attack, stroke, intendisfigurement (permanent or otherwise), blindness, paralysis, suffocation, broken bones, and other se injuries including death.	exposed to above-normal risks is provided, it is impossible for at the MINOR and I bear the dian of MINOR voluntarily mage to MINOR while MINOR is dividually and as parent or legarules of safety, obey all laws, during participation in this advised of the potential hazards ters involving Athletic Camp, ernal injury, hernias.
With all of these facts being known, I, individually, and as parent or legal guardian of MINOR voluntarily agree harmless TECH from any and all actions, causes of action, claims, judgments, loss, liability, damage or costs suffered as a result of MINOR participating in the Athletic Camp, whether caused by the active or passive neg its officers, shareholders, employees, individuals, agents, or representatives. I, individually and as parent or lethat this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in fu individually, and as parent or legal guarding of MINOR, attest and verify that MINOR is physically fit and suffice the Athletic Camp.	(including attorneys fees) pligence or otherwise of TECH, egal guardian, expressly agree a laws of the State of Arkansas, all legal force and effect. I,
I understand that by signing this document, this release of liability is legally binding on me, the minor, our heirs relatives and assigns and that I am knowingly and intentionally giving up both my and the MINOR'S legal right otherwise would be available to me and/or MINOR, our heirs, personal representatives, relatives or assigns a	s and remedies which
By my signature hereto, I certify that I have read and understood each and every provision contained h the significance of this release of liability to MINOR; and that I am of legal age and have voluntarily signall of its terms.	
Please initial and indicate whether you are the parent or legal guardian of the minor.	
() Parent () Legal Guardian	
Print Minor's Name	
Parent or Legal Guardian's Signature	

Date