



COLLEGE PARK FALCONS

SPORTS & CONDITIONING SUMMER CAMPS

IN CONJUNCTION WITH OUR ATHLETIC BOOSTERS

ATHLETIC BOOSTERS ACTIVITY WAIVER AND RELEASE

Campers Name: _____ **Campers Age:** _____

Guardian Name 1: _____ **Parent Cell 1:** _____

Guardian Name 2: _____ **Parent Cell 2:** _____

In consideration for participating in College Park High School Summer Camps, I hereby waive, release, and discharge any and all claims for damages, personal injury, death, or property damage, which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above entity (its officers, employees, volunteers and agents), and the Mt. Diablo Unified School District, from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks, I hereby assume those risks. I agree to indemnify and hold the above persons or entities harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity. I state that the said minor is physically able to participate in said activity.

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of allowing the below identified minor being allowed to participate in camps and related events and activities offered at College Park High School, the undersigned acknowledges and agrees that:

1. I understand, acknowledge and agree that Mount Diablo Unified School District and the College Park Athletic Boosters Club, its employees, officers, agents or volunteers shall not be liable for any injury/illness suffered by my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity and I voluntarily assume all risk, known or unknown, of injuries, howsoever caused, even if caused in whole or in part by the action, inaction, or negligence, of the released parties to the fullest extent allowed by law.
2. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist.
3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my Player/student's participation; and,
4. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. Further I have informed and discussed the dangers of participation and the required rules and regulations to allow participation to my Player/Student and he/she acknowledges a full understanding of such; and,
5. I, for myself and on behalf of my Player/Student, heirs, assigns, personal and representatives HEREBY RELEASE AND HOLD HARMLESS the Mount Diablo Unified School District and the College Park Athletics Boosters, its officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

PARENTAL CONSENT:

I hereby additionally consent that my son/daughter, may participate in the above activity and I hereby execute the above ACTIVITY WAIVER AND RELEASE on his/her behalf. I have carefully read this WAIVER AND RELEASE and fully understand its contents. I am aware that this release of liability ad contract between myself and the above entity and I sign it of my own free will. I further understand that no medical insurance is provided and that no refunds will be given.

Parent Signature: _____ **Date:** _____