

PREVAIL VOLLEYBALL – SUMMER 2022 CAMPS

I REGISTERED ONLINE FOR:

- Elementary TOTS Camp Elementary School Clinic Middle School Boys Camp
 Middle School Girls Camp High School Girls Camp High School Boys Camp

Name: _____ **Age:** _____ **Grade:** _____ **D.O.B.:** _____

Address: _____ **City:** _____ **Zip Code:** _____

AAU #: _____ **(REQUIRED)** **Years of Experience:** _____

Family E-Mail(s): _____

Name of Parent(s): _____ **Cell Phone:** _____

_____ **Cell Phone:** _____

Emergency Contact: _____ **Phone Number:** _____

Allergies/Health Problems: _____

Health Insurance Provider: _____

WAIVER AND RELEASE FORM:

In consideration of being allowed to participate in any way in the athletic/sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. The risk of injury from activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,*
- 2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others and assume full responsibility for my/my child's participation; and,*
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself/my child from participation and bring such to the attention of the nearest official immediately; and,*
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release the PREVAIL Volleyball club, officials, agents, and/or employees, Coaches (Clark Sheaffer, Monica Sheaffer, Melanie Sheaffer, C. Tyler Sheaffer, Christian Sheaffer, and other PREVAIL coaches), other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (Flight Path One) with respect to any and all injury, disability, death, or loss or damage to person or property, whether caused by the negligence of the releases or otherwise.*
- 5. I, for myself/my child and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby indemnify and hold harmless all the above releases from any and all liabilities incidental to my/my child's involvement or participation in these programs. 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.*

Adult Participant's Signature

Date Signed

**Parent or Guardian Signature for Minors
Under Age 18**

Minor's Name