

Print, Sign and Return This Form

**THE UNIVERSITY OF TEXAS AT AUSTIN • SPORTS CAMPS
ASSUMPTION OF RISK/RELEASE AND INDEMNIFICATION AGREEMENT**

Check Session(s) your child is in:

Traditional Camps: S 1 (June 6-10)____, S 2 (June 13-17)____, S 3 (June 20-24)____, S 4 (June 27-July 1)____,
S 5 (July 5-9)____, S 6 (July 11-15)____.

Quick Start Camps: S 1 (June 7-10)____, S 2 (June 14-17)____, S 3 (June 21-24)____, S 4 (June 28-July 1)____,
S 5 (July 5-8)____, S 6 (July 12-15)____.

Tournament Preparation Camp (June 1-4)____, Match Play Camp (July 18-22)____.
Day Camp Only (July 25-29)____, Team Camp (July 30-August 1)____.

PARTICIPANT: (Name)

CAMP: Longhorns Tennis Camp 2010

LOCATION:

DATE(S):

I am the Parent/Guardian of the above-named Participant who is under eighteen years of age and am fully competent to sign this Agreement.

I realize that my child’s participation in camp activities carries with it risk of injury/illness, even when all rules are followed and conditions are optimal. There are various safety problems that can increase injury risk potential. Some safety problems are regularly identified and addressed (i.e., heat illness and the administration of liquids frequently during practices; collisions and the use of high quality, durable, and safe protective equipment). Some safety problems may be less clearly identified (i.e., mechanisms of head and neck injuries or ankle and knee injuries,) and, therefore, prevention and protection are difficult. Risk can be increased due to the participant’s lack of compliance with specified instructions (i.e., using improper footwear, knowingly using dangerous or faulty equipment, training when environmental conditions are dangerous (high heat/high humidity, lighting), and engaging in high intensity or high volume training or executing new skills without adequate fitness. Even in the best facilities, with adequate supervision, use of all protective equipment, and compliance with all of the rules, there remains an inherent risk of injury/illness in any camp activity, and this risk is increased even more so with contact sports.

I acknowledge that my child’s voluntary participation in this camp may expose him/her to hazards or risks that may result in his/her illness, personal injury, or death. I acknowledge that I am aware of the risks of injury/illness and knowledgeable concerning rules, equipment and practices being employed by UT camp personnel to minimize my child’s risk of sustaining an injury/illness while participating in camp activities. My child agrees to use all required protective equipment and follow all rules and instructions from University officials regarding safety. Also, my child has no known physical infirmities which could be worsened or aggravated by participation and I declare him/her physically fit and in good medical condition to engage in all camp activities.

In consideration of my child being permitted to participate in the camp and to use the program’s facilities and equipment, I hereby accept all risk to my child’s health and of his/her injury or death that may result from such participation. I hereby release The University of Texas at Austin, its Board of Regents, officers, employees, and representatives from any and all liability in any way resulting or arising from any injuries (including death), damage, loss or costs that may incur as a result of my child’s participation in the camp. I intend this release to be binding upon my heirs, executors, administrators and assigns. I further agree to indemnify and hold harmless the Institution and its governing board, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from Participant's negligent or intentional act or omission while participating in the described Activity.

I have carefully read this agreement and I understand that it is a legally binding document that affects my child’s legal rights and remedies.

Signature of Parent/Guardian

Date Signed

Address (if different than Participant’s)

Signature of Witness (21 years of age or older)

Date Signed