## THIS APPLICATION IS FOR MANUAL REGISTRATIONS ONLY

## Print and mail with \$100 Non Refundable deposit or full amount to: Alabama Gymnastics Camp Box 870393 Tuscaloosa, AL 35487

Full Name:	Preferred Name:
	<u> </u>

G4.4		<b>7.</b>
State:Zip:		Zıp:
Camper Email:		
Age:G	raduatio	on Year:
Cell:		Email:
Cell:		Email:
Gym Phon	ne:	_
te: (List level nu	mber 1-1	10 or Elite ONLY)
Adult: XL L M S		
Child: L M		
Adult: L M S XS		
Child: L M S XS		
Type of Camper:		
Overnight Camper (9-18 years)	or	Day Camper (7-18 years)
Overnight Camper (9-18 years)	or	Day Camper (7-18 years)
Overnight Camper (9-18 years)	or	Day Camper (7-18 years)
need to know about your daught	er:	



# Youth Protection Program: Liability Waiver

Program: Alabama Gymnastics Camp	Event Date(s):	6/21-6/23; 6/28-6/30; 7/12-7/14
Participant:	Age (at the tim	ne of program): 18 or under
Purpose This form is to be signed by each Participant (or the parent/guinvolved in the Program. In consideration for the educational provided, the receipt and adequacy of which is acknowled.	al, social, recreationa	l, and other benefits to be
Liability Release THIS IS A RELEASE OF LIABILITY. Participant knowingly discharges UA and Alabama Gymnastics Camp connected with the Program. By signing this form, the Part Alabama Gymnastics Camp , and any third p Potential Liabilities.	from and against ticipant voluntarily	any and all Potential Liabilities agrees to discharge UA,
Indemnification The Participant agrees to hold harmless and indemnify UA and against Potential Liabilities related to or arising from Assumption of Disk		
Assumption of Risk		
The Participant understands and acknowledges that there are	0 0	
that can result in loss, damages, injury, or death, includ	-	
Travel/traffic risks such as accidents, crashes, at		-
Alabama Gymnastics Camp as well a		
poorly maintained roads, sidewalks, as well as criminal acts t		
Premises risks, including those that may be owned Injury risks from falls, collisions, or accidents (such concussion, etc.);		
Outdoor risks, such as weather, lightning, heat or co	old, insect bites/sting	gs, allergicreactions to plants,
dehydration, hypothermia, drowning, sunburn,	animals, and limite	ed access to medical care;
Risks from others involved in the Program such	as transmitted illne	esses or others' actions;
Health risks, such as allergic reactions, heart or resp	oiratory events as we	ell as other risks inherent in any
strenuous activities, including things identified	as "injury risks" he	erein;
Equipment risks, including failure, misuse, inhe		
Other risks and hazards beyond the control of U.		ics Camp,
including criminal acts that can result in serious	, ,	
Activities potentially related to the Program including but	not limited to:	

The Participant acknowledges that they have had an opportunity to investigate the Program before executing this form and, knowing and understanding all risks associated with the Program, Participant nevertheless VOLUNTARILY AGREES TO ASSUME AND ACCEPT ALL RISKS that potentially accompany participation in the Program. Participant also agrees to take all reasonable steps to avoid any risks, injury, or death.

# Health Care and Emergencies

Neither UA nor \_Alabama Gymnastics Camp \_\_\_\_\_ accepts responsibility or liability for providing health care services or health care insurance for Participant. Participant should consult his/her own medical care provider, and warrants his/her physical fitness to participate in the Program. Participant authorizes UA and \_Alabama Gymnastics Camp \_\_\_\_\_\_ to obtain any necessary medical treatment for Participant during the Program. Participant agrees to be responsible for the payment of any fees and charges that may be imposed by any doctor or hospital facility in the provision of medical care to Participant. Further, Participant agrees to indemnify and hold UA and \_Alabama Gymnastics Camp \_\_\_\_\_\_ harmless from any claim that may be made by a doctor of medical facility of said fees and charges incurred in the provision of medical care to Participant. The Participant is required to provide the name(s) and contact number(s) for a parent, guardian, or other party that is a reliable contact in the event of emergencies.

#### Conduct

Participant agrees, for the duration of the Program, to abide by all applicable federal, state, and local laws as well as the rules and regulations for the Program. Participant also agrees to follow posted signs as well as instructions and directions of University officials and Program directors and supervisory staff.

# **Photography**

Participant acknowledges that photographs and possible videos may be taken and irrevocably and perpetually authorizes UA and <u>Alabama Gymnastics Camp</u> tobroadcast these images. Participant releases and discharges UA and <u>Alabama Gymnastics Camp</u> from any potential claims related to the broadcast or use of their image, and any potential claims related to the work. Participant waives any right to inspect or approve the work or the broadcast of their image. This agreement shall be interpreted in accordance with applicable law. This is the entire agreement of the parties, and any changes must be in writing.

## **Definitions**

The following terms have the stated meaning when used in this document:

<u>Applicable Law</u> – the laws of the State of Alabama, without regard to conflicts of laws provisions. UA does not waive, but reserves, all immunities, including Article I, section 14, of the Alabama Constitution. Claims against the University must be made to the State Board of Adjustment. To the extent not barred by immunity, nor required to be filed before the Board of Adjustment, exclusive venue and jurisdiction of all disputes shall lie in the state and federal courts of Tuscaloosa County, Alabama.

<u>Broadcast</u> - to use, reuse, broadcast, publish and/or copyright, in whole or in part, for advertising, promotion, publicity, trade, educational, commercial, merchandising, packaging, public relations and media purposes, in all media, worldwide without limitation, in perpetuity.

<u>Image</u> - image, picture, name, biographical information, voice, statements, recordings or interviews made by orattributable to the person who is appearing in the work, verbatim or otherwise, photographic portraits, drawings, visual representations, video tapes, motions pictures, or other use of likeness in whole or in part, and any reproductions thereof.

<u>Participant</u> – the person participating in the Program or any University employee (regular or temporary), 3<sup>rd</sup> party employee, student, or volunteer working in any capacity to facilitate or support the Program. If

- the Participant is under age 19 or is under some form of court-ordered guardianship or custodial arrangement, permission and acknowledgement by a parent/guardian is required.
- <u>Potential Liabilities or Claims</u> any and all loss, injury, death, claims, actions, suits, proceedings, settlements, damages, costs, fees, and expenses, at law or equity, known and unknown, for esseen and unforeseen, including, but not limited to, attorney fees and costs of litigation, and liabilities arising out of, connected with, or resulting from the Participant's involvement in the Program, such as medical expenses, other costs, injury, sickness, or death. Additionally, potential claims related to the use of the Participant's image may refer to any liability, damages (compensatory or punitive), claims, or causes of action whatsoever, including, without limitation, claims for invasion of privacy, defamation of character or any alteration, distortion or illusionary effect, whether intentional or otherwise.
- <u>Program</u> <u>Alabama Gymnastics Camp</u> including all activities incidental or connected therewith, such as housing, dining, training, activities, and transportation. Programs may be held on or off University property and may require transit between two or more locations. The terms of this document will apply regardless of Program location, including to and from the event(s).
- <u>UA</u> The Board of Trustees of The University of Alabama (hereinafter referred to as "UA" or "University"), including The University of Alabama, affiliated foundations, and their respective trustees, officers, employees, agents, representatives and volunteers.
- Work the finished product and any material used in connection therewith.
- Alabama Gymnastics Camp Alabama Gymnastics Camp and their directors, trustees, officers, employees, agents, representatives, and volunteers.

Emergency Contact(s	s):	
Name:	Phone:	Name:
	Phone:	
Acknowledgement		
I, ASPARTICIPANT, ACKNO	) WLEDGE THAT I HAVE READ AND UNDERSTAND TH	HISENTIRE
DOCUMENT AND, RELYING	WHOLLY UPON MY OWN JUDGMENT, BELIEF, AND K	NOWLEDGE THE
RISKS ASSOCIATED WITH T	HEPROGRAM, WHICHINCLUDE SIGNIFICANT INJU	RYOR
DEATH, VOLUNTARILY AGE	REE TO EXECUTE THIS DOCUMENT AND PARTICIPATI	E IN THE PROGRAM.
I ACKNOWLEDGE THAT N	O ORAL REPRESENTATIONS, STATEMENTS, OR	
INDUCEMENTS HAVE BEEN	MADE TO ME SEPARATE AND APART FROM THE TER	RMS OF THIS
DOCUMENT. I VOLUNTAR	ILY SIGN THIS AGREEMENT OF MY OWN FREE WIL	L FULLY
INTENDING TO LEGALLY I	BIND MYSELF, MY HEIRS, SUCCESSORS, AND ASSIG	NS TO ITS TERMS.
Signature:	Date:	Printed
Name:	Phone:	-
*If Participant is under the ag	ge of 19, a Parent/Guardian must execute this document.	
Parent/Guardian Ack	knowledgement	
, , , , , , , , , , , , , , , , , , ,	ARDIAN CERTIFIES THAT THEY ARE OVER THE AG	GE OF 19, HAS
•	THIS DOCUMENT, UNDERSTANDS THE RISKS, INCLU	•
	THE PROGRAM, IS VOLUNTARILY ALLOWING PARTIC	
TOTAKEPARTINTHEPROC	GRAM, HASTHERIGHT TOSIGNON BEHALF OF THEP	'ARTICIPANT, IS
SIGNING THIS DOCUMENT	VOLUNTARILY, ACKNOWLEDGES THAT NO ORAL	
REPRESENTATIONS, STATEM	MENTS, OR INDUCEMENTS HAVE BEEN MADE SEPARA	ATE AND
APART FROM THE TERMS OF	F THIS DOCUMENT, AND AGREES TO ENTER INTO TH	IE SAME,
FULLY INTENDING TO LEGA	ALLY BIND PARTICIPANT, HIS/HER HEIRS, SUCCESSOI	RS, AND
ASSIGNS TO THE TERMS OF	F THIS DOCUMENT.	
Parent/Guardian Signature: _	Date:	Printed
Namo	Relationship	

#### **REGISTRATION REQUIREMENTS**

PLEASE MAKE SURE YOU HAVE COMPLETED ALL ITEMS ON THE FOLLOWING CHECKLIST BEFORE SENDING IN YOUR APPLICATION.

COMPLETED APPLICATION FORM
COMPLETED SPORT CAMP RELEASE FORM
ENCLOSE CHECK (\$100 NON REFUNDABLE DEPOSIT OR PAYMENT IN FULL) If registering with deposit the balance for Camp I & II is 5/25/19 and Camp III is 6/14/19.

Mail to:

Alabama Gymnastics Camp Box 870393 Tuscaloosa, AL 35487

Phone: (205) 348-7600