



**SVJFAC FOOTBALL CAMP
AGREEMENT AND RELEASE OF LIABILITY**

I, _____ residing at _____ am the parent or guardian of _____ (Participant). I have the authority to enter into a binding agreement on behalf of the participant, myself and the Participant's parents or guardians. Participant desires to attend the football camp sponsored and organized by SVJFAC, its subsidiaries and agents. In exchange for the Participant being able to attend the football camp, I unconditionally and irrevocably agree as follows:

- 1) In consideration of being permitted to participate in the Seneca Valley Junior Football Association of Cranberry (SVJFAC) football clinic to be held Tuesday's and Thursday's from July 8th thru July 31st, at North Boundary Park, including participation in conditioning and fitness drills, instruction in football fundamentals and football games, in addition to my payment of any fee or charge, I do hereby completely and forever, release and discharge the SVJFAC and each of their respective officers, directors, agents, employees, representatives, successors and assigns and all others from and against any and all responsibility or liability for any and all claims, injuries, and/or damages, including without limitations any injury or damage to Participant and/or property, arising out of or connected with participant's participation in the above mentioned football clinic and related activities, or caused by the negligent act or omission of any of those mentioned or others acting on their behalf. (PLEASE INITIAL _____)
- 2) I understand and am aware that the above mentioned conditioning and fitness drills and instruction in football fundamentals, and football games are potentially hazardous activities that involve health risks and risks of injury. Participant is voluntarily participating in these activities and I hereby agree to expressly assume and accept any and all such health risks and risks of injury. (PLEASE INITIAL _____)
- 3) I do hereby further declare Participant to be physically sound and suffering from no condition, impairment, disease, infirmity or other illness that would prevent Participant's participation in the above mentioned football clinic and related activities. I hereby acknowledge that I understand that participation in the above mentioned football clinic and related activities will require physical exertion and that Participant is of sound physical condition and health. I acknowledge that Participant has been given my physician's permission to participate, or that I have decided to allow Participant to participate in the above mentioned activities without the approval of my physician and do hereby assume all responsibility for Participant's participation in said activities. (PLEASE INITIAL _____)

Signature

Date