

**ACKNOWLEDGEMENT OF RISK AND WAIVER OF LIABILITY
FOR COACH-OPERATED CAMP**

Please read this Acknowledgement of Risk and Waiver of Liability for Coach-Operated Camp carefully and in its entirety; it is a binding legal document.

I, PARTICIPANT, acknowledge that this camp/clinic is not owned or operated by University of Louisiana at Lafayette. The University is not responsible and/or liable for any camp/clinic activities. The camp/clinic is responsible for any and all activities.

I, PARTICIPANT, will indemnify and hold the State of Louisiana, the Louisiana Board of Regents, the University of Louisiana System, the University of Louisiana at Lafayette, and each of their respective employees, directors, officers, members, student workers, student interns, volunteers, representatives, institutions, departments, and agents (hereafter referred to collectively as "UNIVERSITY") harmless with respect to any and all liability, claims, damages, costs, expenses, personal injuries, illnesses, death, or loss of personal property resulting from, in whole or in part, my participation in this camp/clinic or use of any facility, equipment, and/or programs of UNIVERSITY. It is my express intent that this Acknowledgement of Risk and Waiver of Liability for Coach-Operated Camp shall bind my spouse, the members of my family and my estate, and all of my heirs, administrators, legal representatives, and assigns. I further agree to save and hold harmless, indemnify, and defend UNIVERSITY from any claim by the aforementioned parties arising out of my participation in the camp/clinic. I recognize and acknowledge that UNIVERSITY makes no guarantees, warranties, representations, or other promises relative to the camp/clinic, and assumes no liability or responsibility for injury or property damage that I may sustain as a result of participation in the camp/clinic. I further understand and agree that this is a release of liability and indemnity agreement, and it is intended to be as broad and inclusive as permitted by Louisiana law. If any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and legal effect.

PARTICIPANT Signature: _____ Date: _____

Printed Name: _____

Signature of parent/legal guardian is required when the above PARTICIPANT is below the age of 18 at the time of signature.

I, the undersigned parent/legal guardian of PARTICIPANT hereby give my consent to participation by PARTICIPANT in the camp/clinic and agree to all of the above terms and conditions on behalf of PARTICIPANT, myself, and all who may have or may acquire any right or cause of action arising from or relating to PARTICIPANT's illness, injury, death, or loss of or damage to property.

Signature: _____ Date: _____

Printed Name: _____ Relationship: _____