

Thomas Johnson Basketball Camp

Waiver of Liability

Name of Camper(s): _____

Applying for acceptance of my child to the Thomas Johnson Basketball Camp, I, intending to be legally bound hereby for myself, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I may have against the Thomas Johnson Basketball Camp. Berry College, Inc., their representatives, agents or assigns for any and all damages and injuries which may be sustained by me or my child in association with this camp. Also, I hereby authorize the director of Thomas Johnson Basketball Camp to act for me according to his best judgement in any emergency requiring medication attention. My child has had a recent physical examination and is physically able to participate in the athletic activities, including basketball.

I further understand that Thomas Johnson Basketball Camp retains the right to use photographs of campers taken at camp for future Thomas Johnson Basketball Camp Promotion.

Parent or Guardian Signature _____
Date

Emergency Contact: _____ Phone: _____

Health Insurance Carrier: _____

Policy Number: _____

List of any known allergies:

