

Jennies Softball Camp – Waiver Agreement

I agree to release the University of Central Missouri, its Board of Governors, UCM officers and its employees and Head Coach Susan Anderson from all claims on account of injuries or losses which may be sustained by my minor child while attending camp. I agree to indemnify the UCM Board of Governors, UCM officers and employees from any claim which may be presented by my/our minor child in the future resulting from attending camp. We or I understand that any camper who does not abide by camp rules may be dismissed from the camp with no refund. We or I give permission for emergency treatment and permission to the attending physician to hospitalize and secure any treatment deemed immediately necessary, including injections, anesthesia, or surgery. We or I acknowledge that UCM officials will contact us as soon as possible about any incidents requiring emergency medical intervention. We will be responsible for any medical charges incurred in connection with our/my minor child and we certify that our/my minor child is covered by medical insurance.

Parents/Guardians Signature: _____

Date: _____