



ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

Participant Name _____ Participant Birthdate _____

Parent/Guardian Name _____

StreetAddress _____

Phone _____ Email Address _____

I hereby assume all of the risks of participating in this Speed and agility camp , Including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them, or because of their possible liability without fault.

_____ I certify that I am physically fit and have not been advised to not participate by a qualified medical professional. I certify that there are **no health-related reasons or problems which preclude my participation in this Speed Training**. I acknowledge that this Accident Waiver and Release of Liability Form will be used by Back To Basic Speed Training in which I may participate and that it will govern my actions and responsibilities at said.

_____ **I WAIVE, RELEASE, AND DISCHARGE** from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this Sports Camp. **THE FOLLOWING ENTITIES OR PERSONS:** Back to Basic Speed & AGILITY , Antonio Daniels , and/or their coaches, or volunteers.

_____ **I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE** the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this Sports Camp/ Youth speed and agility , whether caused by negligence or otherwise.

_____ I consent and agree that Antonio Daniels and/or their coaches, and volunteers may take photographs or digital recordings of me as a participant during this event and use these in any and all media for training or promotional purposes. I further consent that my identity may be revealed therein or by description text or commentary. I waive any rights, claims or interest and I understand that there will be no financial or other remuneration.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT ON MY OWN FREE WILL.

Participant's signature

_____ Date _____

(PARENT/GUARDIAN if under 18 years of age)

_____ Date _____