

# **gRow TRAINING BASKETBALL CAMP**

## **GIRLS & BOYS:**

**SAT., JULY 9<sup>TH</sup> & SUN., JULY 10<sup>TH</sup>**

**10 am-11am (ages 7-9)**

**11:15 am-12:30 pm (ages 10-13)**

**1:30 pm -4:30 pm (ages 14-18)**

**Watersmeet Township School**

**COST: NO CHARGE – SPACE LIMITED TO FIRST 70 APPLICANTS**

**PARTICIPANT'S NAME**\_\_\_\_\_

**SEX**\_\_\_\_**AGE**\_\_\_\_**BIRTHDATE**\_\_\_\_\_**SHIRT SIZE**\_\_\_\_\_

**ADDRESS**\_\_\_\_\_**E-MAIL**\_\_\_\_\_

**PHONE #**\_\_\_\_\_**PARENT/GUARDIAN WORK #**\_\_\_\_\_

**PARENT/GUARDIAN NAME**\_\_\_\_\_

**ALTERNATE EMERGENCY CONTACT NAME AND NUMBER** \_\_\_\_\_

### **NOTICE REGARDING RISK OF INJURY AND RELEASE AND WAIVER OF ALL CLAIMS**

I hereby apply to register to gRow Training Basketball Camp (the "Camp") being held by the Lac Vieux Desert Boys and Girl Club ("Camp Sponsors") on July 9-10, 2022. I understand that participating in the Camp may expose me to above normal risks of injury or harm. These risks include but are not limited to uneven or hazardous playing surfaces, physical contact or collisions with other players, spectators, or inanimate objects on or about the court. I understand that the sport of basketball is hazardous and may result in injury to me or other players. I represent that I have no health or physical problems that will interfere with my participation in the Camp. I agree that I am responsible for my own safety. I hereby assume all risks associated with my attendance and participation in the Camp. I understand that I am solely responsible for injuries which may occur to me as a result of participation in the Camp and which I specifically waive my right to bring any and all claims against the sponsors and specifically release any right which I have to assert any negligence claim against the Lac Vieux Desert Band of Lake Superior Chippewa Indians ("Tribe"), its departments, employees, agents or representatives or the Watersmeet Township School District. I hereby fully and forever release, discharge and agree not to sue the Tribe, its employees, agents, and representatives and the Watersmeet Township School District from any and all claims, causes of action or liability for any injury, loss or damage sustained or incurred by me arising out of or in any way associated with my attendance and participation in the Camp, including all claims, causes of action or liability arising out of the negligence of the Camp Sponsors, its departments, employees, agents or representatives. I agree to indemnify and hold harmless Camp Sponsors, their departments,

employees, agents and representatives from any loss, damage or expense sustained or incurred by them arising from any such claims, cause of action or liability, whether brought by me, anyone acting on my behalf, or by anyone else because of conduct attributed to me. In consideration of participation in the Camp, I agree that my likeness may be photographed or videotaped and that such image may be published in any outlet used to publicize the Camp. I agree that this agreement shall be construed and interpreted in accordance with the laws of the Tribe. I understand and agree that this Release and Waiver shall be binding on my heirs, assigns and any personal entity acting on my behalf, including a parent, guardian or next friend. I understand and acknowledge that nothing in this agreement constitutes a waiver of any privilege or immunity afforded to the Tribe. I have read and understand the above items of the Release and Waiver, understand them, agree to abide by them, and hereby acknowledge that I have read and understand this Release and Waiver.

**Date :** \_\_\_\_\_

\_\_\_\_\_ **I am at least 18 years old.**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_ **Participant is less than 18 years old.**

\_\_\_\_\_  
**Printed Name**

I sign this release on behalf of my minor child, and hereby agree to indemnify and hold harmless the Tribe, the Watersmeet Township School District and the Camp Sponsors, their Departments, employees, agents and representatives, from any loss, damage or expense sustained or incurred by them arising from any claim, cause of action or liability which may be brought by my minor child.

**PARENT/GUARDIAN** \_\_\_\_\_

**PRINTED NAME**

\_\_\_\_\_  
**SIGNATURE**

**MAIL TO:**

**Boys & Girls Club/Rec Center**