

Timberlake Football

2019 Frosh Football Camp

June 11th -14th
Camp Cost: Free

Time Schedule:

Gear Check-out

June 10th - 4:30pm - after Timberlake Power

Camp Dates

June 11th - 5:00-6:30pm - Practice Field

June 12th - 5:00-6:30pm - Practice Field

June 13th - 5:00-7:00pm - Scrimmage @ Lakeland H.S. - Scrimmages start @ 6pm

June 14th - 9:00am - Noon - Scrimmage @ Post Falls H.S. - Scrimmages start @ 10am

Sign and Return

I plan to attend Timberlake's frosh football camp June 11th-14th

Name: _____ Phone Number: _____

Timberlake Frosh Football Camp

READ BEFORE SIGNING

In consideration of being allowed to participate in any way in Timberlake Frosh Football Camp, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

The risk of injury from the activities involved in this program are significant, including the potential for, but not limited to, falls, slips, sprains, broken bones, contact with other players, paralysis, and sudden death. While particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist.

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation. I certify that I AM OF THE AGE THAT MYSELF AND MY PARENT OR LEGAL GAURDIAN HAS STATED ON MY APPLICATION; and that this waiver remains in full force and effect until specifically revoked in writing by me.

I willingly agree to comply with all of the stated and customary terms and conditions for participation.

I, for myself, and on behalf of my heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE AND HOLD HARMLESS, Timberlake Football, game site host, their agents, assistants, volunteers, medical personnel, officers, employees, sponsoring agencies, sponsors, advertisers, owners or lessors of any premises used to conduct the event (known herein as RELEASEES), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss, or damage to person or property, WHETHER ARISING FROM NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant's Signature _____ Date Signed _____

Print Your Name Here _____

Parent Signature _____ Date Signed _____

Print Parent Name Here _____