



**University
of Dayton**

Assumption of Risk and Release of Liability

Athletic Camp: 1 Day Prospect Camp

Date(s): June 1st

Operated By: Dayton Football Ventures LLC (the "Camp Operator")

Location: Jerry Von Mohr Practice Field

Participant Name (please print): _____ (the "Participant")

I, the undersigned, am 18 years of age or older (if not 18, a parent or legal guardian must sign in the space provided for below) and have voluntarily chosen to attend and participate in the above-described Athletic Camp on the University of Dayton's campus (the "Athletic Camp," which shall also refer to and include transportation to/from/about the event, all overnight accommodations, and all unofficial and/or social activities that take place incidental to the Athletic Camp itself). I understand that this Athletic Camp is operated by the Camp Operator, which is a separate legal entity from the University of Dayton. In consideration of being allowed to participate in the Athletic Camp on the University of Dayton's campus and use the University of Dayton facilities and equipment, the receipt and sufficiency of which consideration is hereby acknowledged, I understand and agree as follows:

I understand and accept that there are certain risks including bodily injury, death, or property damage inherent in the Athletic Camp and use of the University of Dayton facilities and equipment or arising in connection with the Athletic Camp and use of the University of Dayton facilities and equipment. I further acknowledge that some risks are unforeseeable and that it is not possible to list every possible risk in this Agreement. Furthermore, in full recognition and appreciation of the potential dangers, hazards, and risks inherent in this Athletic Camp and use of the University of Dayton facilities and equipment, I hereby knowingly and voluntarily assume any and all risks, liabilities, and responsibilities for all accidents, injuries, damages, or property losses that may arise out of or relate to my participation in the Athletic Camp and/or use of the University of Dayton facilities and equipment. I hereby declare I am in good health and have no mental or physical condition or symptoms that could interfere with my safety or the safety of others while participating in the Athletic Camp and/or use of the University of Dayton facilities and equipment. Furthermore, I certify that I have adequate health insurance to cover any injury or damage that I may suffer while participating, or alternatively, agree to bear all costs associated with any such injury or damages.

I, individually, and on behalf of my respective heirs, successors, assigns, and personal representatives, do hereby irrevocably release, waive, forever discharge, and covenant not to sue, and agree to indemnify and hold harmless, the Camp Operator, the University of Dayton, and together their respective trustees, officers, agents, assignees, affiliates, employees, students, volunteers, and representatives (collectively the "Releasees") from and against any and all liability whatsoever for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature which I may have or which may hereafter accrue, arising out of or related to any loss, damage, or injury, including but not limited to suffering and death, that may be sustained by person or property or both, in connection with or arising out of my participation in the Athletic Camp and/or use of the University of Dayton facilities and equipment, whether caused by the negligence of Releasees or otherwise.

I hereby grant Releasees permission to authorize emergency medical treatment, if necessary, at my expense, and that such action by Releasees shall be subject to the terms of this Agreement.

I acknowledge that the University of Dayton offers Wi-Fi access to all guests and visitors to campus, and that if I use the University of Dayton's Wi-Fi, I will have unsupervised and unfiltered access to the Internet and therefore will be accessing the Internet at my own risk.

By signing below, I acknowledge that I have read this Agreement, that I understand its terms and conditions, that I understand it affects my legal rights, and that I have signed it knowingly and voluntarily. I further agree that this Agreement shall be construed in accordance with the laws of the State of Ohio.

THIS IS A RELEASE OF LEGAL RIGHTS. READ BEFORE SIGNING. IF YOU ARE UNDER 18, THIS FORM MUST BE SIGNED BY YOUR PARENT OR LEGAL GUARDIAN.

Participant Signature

Date

For parent/legal guardian, if Participant is a minor: As a parent/legal guardian on behalf of the above-named Participant, I have read the above terms of this Agreement, and I understand and agree to the terms and conditions stated herein on behalf of myself and the Participant. This Agreement shall be binding upon the heirs, administrators, executors, and assigns of the undersigned. I further agree to indemnify, release, and hold the Releasees harmless against any injury, claim, or action brought against Releasees by or on behalf of the above-named Participant, including but not limited to an action brought by the Participant upon reaching the age of majority. I warrant that I am authorized to execute this Agreement on behalf of the Participant.

Parent/Legal Guardian Name (Print)

Parent/Legal Guardian Signature

Date