

# NORTH ALABAMA TEAM CAMP

## 2015 North Alabama Team Camp

**School Name:** \_\_\_\_\_

**Camp Attendee's Name:** \_\_\_\_\_

PLEASE PRINT

### Parental Consent and Insurance Release Form - Muscle Shoals HS

I, as a parent or legal guardian, have actual knowledge and appreciation of the particulars of the camp. Including those risks involved in participation in the football camp, and hereby voluntarily consent to said minor's participation and assumes risks arising there from. I hereby give my permission for a qualified physician, athletic trainer and/or hospital emergency room to administer necessary health care in the case of an accident and/or emergency. In addition, I acknowledge that I have read and understand all information provided in this brochure. I also understand that my child will be covered under the same insurance policy that exists for his participation in football at his high school as an extracurricular activity, and that any accident or medical need for insurance shall be covered by this policy while my child attends this camp, just as if he were participating in football at his high school.

I do hereby hold North Alabama Team Camp, Muscle Shoals High School, and Muscle Shoals City School District harmless for any/all injuries or damages arising from the above named child's participation in the camp activities and I do, for myself, my heirs, executors, and administrators, remise, release, waive, and forever discharge North Alabama Team Camp and Muscle Shoals High School, and all of its officers, agents, and employees acting official and otherwise, from all claims, demands, actions or causes of action, on account of any injury, death or property damage which may occur at any time or for any cause during their participation in the camp named above. I consent, release and fully understand the above statement.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_