

**University of Minnesota Duluth**  
**Recreational Sports Outdoor Program**  
**Youth Sports · Youth Classes · Youth Camps**

**RELEASE OF LIABILITY**

Camp or Sport Name: \_\_\_\_\_ Date(s): \_\_\_\_\_

Participant Child's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail \_\_\_\_\_

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In consideration of being allowed to participate in any way in the above listed camp or seminar, related events and activities, I, the undersigned, acknowledge, appreciate and agree, on behalf of my child, that:

1. While particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist and that risk of injury from the activities involved in these programs is significant, including the potential for permanent injury; and
2. I knowingly and freely assume all such risks, both known and unknown, and assume full responsibility for my child's participation; and
3. I acknowledge and consent to the use of video recordings and photographs of my child's participation in promotional activities conducted by Releasees; and
4. I willingly agree that my child will be instructed to comply with the stated and customary terms and conditions for participation. I will instruct my child, however, if they observe any unusual significant hazard during their presence or participation, they should remove themselves from participation and bring such to the attention of the nearest official immediately; and
5. I understand that if I choose to drive my child in my own vehicle or allow them to be a passenger in a non-University vehicle while traveling to and/or from a seminar, camp, or club event or activity, University automobile liability insurance coverage will not apply; and
6. I, for my child, and on behalf of my child's heirs, assigns, personal representatives and next of kin, hereby release, indemnify and hold harmless Regents of the University of Minnesota and the Recreational Sports Outdoor Program, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event or activity ("Releasees") with respect to any and all injury, disability, or loss or damage to person or property, to the fullest extent permitted by law.

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

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(If participant is under the age of 18, parent/legal guardian signature)

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**Emergency Contact Information**

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

On behalf of my child, I understand, agree and acknowledge that some activities may be of a hazardous nature and/or include physical and/or strenuous activity. Understanding this, I state that my child has no medical condition or impairment, including the use of medication that might inhibit active participation in the above listed camp or seminar program. I understand that my child is required to have medical coverage, and I verify that the insurance policy information attached as to their medical coverage is accurate and true. In the case of an injury, I authorize the University of Minnesota, Duluth and the Recreational Sports Outdoor Program Department to render first aid and/or obtain whatever medical treatment deemed necessary for the welfare of my participating child. I further understand and agree that I will be financially responsible for all charges and fees incurred in rendering said treatment, regardless of whether my medical insurance would cover such charges and fees.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(If participant is under the age of 18, parent/legal guardian signature)

I am the parent or legal guardian of the minor \_\_\_\_\_, and I am signing this release on behalf of the minor.  
(print child's name)

