## **Berry College** Waiver of Liability, Assumption of Risks, and Indemnification Agreement

In consideration of Berry College allowing the use of a portion of its property or facilities for the purpose of attending (camp name) during the month of June, I \_\_\_\_\_ (guest or camper) hereby agree to waive and release any and all

claims which I or my family may now or hereafter have against Berry College, Inc., its representatives, agents, employees or assigns for any injury, illness, or damage which I suffer, unless proven such claim occurred based solely upon the gross negligence of Berry College, Inc., while on Berry property or attending a camp or activity at Berry. This includes all activities related to the camp or activity including any transportation related to the activity. I and my family agree to fully and completely indemnify and hold harmless Berry College, its representatives, agents or assigns from any claim, action, cause of action, or suit including litigation expenses and attorney fees due to any injury or damage which may have occurred on of or arising out of or in connection with my use of said premises. I, for myself and/or my minor child (if applicable and signatures appear below), acknowledge and understand this means I knowingly and voluntarily assume any and all risks, both known and unknown, appurtenant to the use of said premises for the camp or activity, wherever on Berry's campus they may occur, and at all times I am present on said premises.

If this waiver/Agreement is signed by a parent or guardian below, you hereby acknowledge that this waiver and indemnity shall be binding upon you, any other parents or legal guardians of said minor child, and the minor child to the fullest extent permitted under the law.

Date Signed\_\_\_\_\_

Signature of Guest

Name of Guest

Signature of Guardian or Parent if guest is under 18

Name of Guardian or Parent

Address

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

## WAIVER OF LIABILITY

Name of Camper(s):

Applying for acceptance of my child to the David Beasley Baseball Camp, I, intending to be legally bound hereby for myself, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I may have against the David Beasley Baseball Camp, Berry College, Inc., their representatives, agents or assigns for any and all damages and injuries which may be sustained by me or my child in association with this camp. Also, I hereby authorize the director of the David Beasley Baseball Camp to act for me according to his best judgment in any emergency requiring medical attention. My child has had a recent physical examination and is physically able to participate in athletic activities, including baseball.

Parent or Guardian Signature	Date
Health Insurance Carrier:	
Policy Number:	
List any known allergies (bees, peanuts, etc.):	