

**LaVall Jordan Basketball Camp, LLC RELEASE AND WAIVER OF LIABILITY**  
(To be completed/signed by parent/guardian of minor participants prior to participation)

I am permitting my minor child to participate in the Butler Basketball Camp run by LaVall Jordan Basketball Camp, LLC (“Camp”). I hereby acknowledge that participation in the Camp will involve physical and recreational activities and that these activities may involve risks including, but not limited to, the following:

- Physical exertion, such as running, swimming, and making quick movements.
- Environmental hazards, such as uneven, rough terrain; hot, exposed climate; unpredictable weather; unpredictable contact with plants, insects and other naturally occurring phenomenon.
- Risks inherent to participation in sports and other recreational activities, such as being hit or struck by equipment or rough, physical contact with other participants.

I realize that it is not possible to list specifically each and every risk. However, knowing the material risks and appreciating knowing and reasonably anticipating that injuries, illness, paralysis and even death are possible, on behalf of my minor child, I hereby expressly assume all such risks that could occur by reason of his/her participation in any activities and the use of facilities and equipment related to the Camp.

I agree that, in exchange for and in consideration of LaVall Jordan Basketball Camp, LLC permitting my minor child to participate in the Camp, I hereby agree to forever release LaVall Jordan Basketball Camp, LLC, Butler University, their trustees, officers, agents and employees, from any cause of action, claims, or demands of any kind and nature whatsoever including, but not limited to, claims for negligence or any other form of action for which a release may be legally given (including attorneys’ fees and costs) which may arise by or in connection with my minor child’s participation in any activities related to the Camp.

I further covenant not to sue and agree to hold harmless and indemnify LaVall Jordan Basketball Camp, LLC, Butler University, their trustees, officers, agents and employees from any and all liability, causes of action, claims, demands, losses or costs of any kind and nature whatsoever (including attorneys’ fees) arising out of or in anyway relating to my minor child’s participation in any activities or his/her use of the facilities or equipment related to the Camp.

I understand that while participating in the Camp, my minor child must follow the instructions and directions provided by University personnel and that he/she must abide by the policies of LaVall Jordan Basketball Camp, LLC. Failure to follow instructions or directions may result in my minor child’s immediate expulsion from the Camp.

I hereby certify that I am voluntarily signing this release, and intend to be legally bound by the terms of this document. I have carefully read all of its provisions, and fully understand its significance.

Print Name of Minor Child: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name of Parent/Guardian: \_\_\_\_\_

Our athletic accident policy which provides insurance for your son or daughter for injury sustained while participating in the play or practice of this sport is "Excess" or "Secondary" coverage. This simply means that it pays benefits only after taking into consideration those amounts payable under any other group plan. We, as the University, do not have the option of waiving this provision.

**PLEASE PROVIDE THE INFORMATION REQUESTED BELOW**

NAME OF GROUP POLICYHOLDER \_\_\_\_\_

GROUP/IDENTIFICATION NUMBER(S) \_\_\_\_\_

NAME OF INSURANCE COMPANY \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_ I hereby authorize a claim to be filed on my behalf under the above group medical policy in the event an athletic injury is sustained by \_\_\_\_\_; and I hereby authorize payment of benefits to the provider of services. My son/daughter is not covered under my group insurance.