2021 John Walker's Big Red Soccer Camp

This form must be completed PRIOR to the start of camp for your camper to attend camp.
WAIVERS WILL NOT BE ACCEPTED ON CAMP DAY!

Name of Camper _____

Insurance

All participants should be covered by a personal medical insurance policy. Each camper is asked to supply the company name, address, policy #, and policy owner. Accident insurance provided by the camp is on an excess basis.

Insurance Company _____ Address _____

Owner _____Policy # _____

Medical Certification

This medical certification requires a doctor's signature **OR** the camper may use his/her 2020-21 form required by his/her school (The signature or physical date MUST be dated within one year of the first day of camp).

I hereby certify that _____ is physically fit to participate in an active soccer during the days of the camp he/she has registered for and that I know of no physical impairments which would in any manner limit his/her participation in such a program.

Doctor's Name _____Doctor's Signature _____ Date _____

Youth Safety

A Youth Activity Safety Policy has been implemented to provide a safe environment for youths participating in activities, camps or clinics.

Our policy includes safe interaction guidelines including sex offender registry checks for Activity Workers. This policy will help to protect participating youths from potential misconduct incidents and help provide a safe, educational and enjoyable activity/program experience.

Activity Workers

1. All Activity Workers must successfully pass a sex offender registry search for Nebraska and the state(s) they reside.
2. All Activity Workers driving activity vehicles must successfully pass a Driving Record Check.
3. In the case of an emergency or accident involving your youth, parents/guardians will be notified, following notification of the appropriate emergency personnel.
4. All UNL activities will comply with UNL's *Youth Activities Safety Guidelines*.
5. As parent(s) or legal guardian(s) you give permission to this activity to use photos of your child in promotional media.

Disciplinary Action

The Activity Directors of Big Red Soccer Camp reserve the right to immediately dismiss any youth from the activity, camp or clinic who is found to have violated behavioral expectations. Dismissed youth will be sent home at their expense and will be responsible for all other expenses associated with their dismissal. Parent(s)/Guardian(s) will be immediately notified of the youth's dismissal.

Parent/Guardian's Printed Name: _____

Signature: _____

Phone Number: _____

Date: _____ I

It is the policy of the Big Red Soccer Camp to admit any and all qualified applicants without regard to disability, race, color, religion, national or ethnic origin, or sexual orientation.

WAIVER AND RELEASE OF LIABILITY

DISCLAIMER: The UNIVERSITY OF NEBRASKA and BIG RED SOCCER CAMP are NOT RESPONSIBLE for any injury or loss of property to any person suffered while warming up, practicing, traveling, playing, or participating in **Camp Activities** for any reason whatsoever, including ordinary negligence.

This **WAIVER** and **RELEASE OF LIABILITY** was executed this ____ day of _____ 2____, by _____,

(Releasor) in favor of the **UNIVERSITY OF NEBRASKA and BIG RED SOCCER CAMP and its Regents, Officers,**

Employees, Instructors, Staff, agents, operators, successors, and assigns (University and Camp).

The **Releasor** serves as a parent/guardian whose child (camper) wishes to participate in **Camp Activities**. In consideration for the privilege of participation in the program, the **Releasor** consents and agrees to the following:

1. **Releasor** certifies that camper is physically capable of participating in Camp Activities and that he/she will take responsibility for physical fitness and capability to perform under normal conditions in these Activities. **Releasor** is encouraged to get camper physician's opinion prior to participating in these Activities. In the event of a medical emergency, the University of Nebraska or **BIG RED SOCCER CAMP**, or its representatives have my permission to take whatever measures they deem reasonable to render assistance and that I and/or my family will be financially responsible for any expenses involved.

2. **Releasor** realizes that camper participation in these Activities involves certain risks and danger and may be a vigorous activity involving severe respiratory and cardiovascular stress. **Releasor** has hereby been made aware that participation in these Activities has the following non-exclusive list of certain risks which I accept: death; head, eye, neck, and spinal injury resulting in complete or partial paralysis; brain damage; heart attack; blisters; cuts; lacerations; abrasions; concussions; contusions; strains; sprains; dislocations; fractures; cold and heat injuries; water immersion; drowning; lightning strikes; injury to bones, joints, muscles, internal organs; and environmental conditions. In addition, I understand and accept the incidental risks of travel to and from the site of activity; participation at sites that may be remote from available medical assistance; and the possible reckless conduct of other participants.

3. Consequently, while understanding that the **University and Camp** has taken precautions to provide organization, supervision, and equipment for reasonable safety, **Releasor** assumes joint and personal responsibility for safety while camper is participating in these Activities. **Releasor** accepts personal responsibility to ensure that any equipment needed to participate in these Activities and used by the **camper** is safe and functioning properly and to refrain from causing loss or damage to the property of the **University and Camp**. **Releasor** realizes that he/she is solely responsible for any personal equipment, supplies, or property camper may choose to use during the duration of the activity.

4. **Releasor** further agrees to indemnify and hold harmless the **University and Camp** for any and all claims or actions as a result of engaging in, using **University and Camp** facilities and equipment, or any activities incidental thereto whatsoever, whenever, or however the same may occur.

5. **Releasor** is aware that if he/she uses a vehicle not operated by the **University and Camp** for transportation to, at, or leaving the activity site, the **University and Camp** is **NOT** responsible for any damage caused by or arising from **Releasor's** use of such vehicle. Furthermore, **Releasor** acknowledges that he/she is solely responsible for any action the camper takes outside the scope of those actions permitted by the **University and Camp** for purposes of the particular activity regardless if occurring before, during, or after the duration of the activity.

6. In consideration of participation in these Activities, **Releasor** hereby **RELEASES** and covenants not-to-sue the **UNIVERSITY and BIG RED SOCCER CAMP** for any and all present and future claims resulting from ordinary negligence on the part of the **UNIVERSITY and BIG RED SOCCER CAMP** for property damage, personal injury, or wrongful death arising as a result of camper engaging in, using **University and Camp** facilities and equipment, or activities thereto, wherever, whenever, or however the same may occur. **Releasor hereby voluntarily waives** any and all claims or actions resulting from ordinary negligence, both present and future, that may be made by **Releasor's family, estate, personal representative, heirs, or assigns.**

I have read and understand that this **WAIVER** is intended to be as broad and inclusive as permitted by the laws of the State of Nebraska and agree that if any part is held invalid, the remaining parts of this **WAIVER AND RELEASE** will continue in full force and effect as intended. I further agree the venue for any legal proceeding shall be in the State of Nebraska.

I understand the rights that I am **waiving** and that I am freely signing this **WAIVER AND RELEASE**. I have read and fully understand that by signing this agreement I am giving up legal rights and remedies, which may be available to me for ordinary negligence of the **University and Camp**. I further agree to follow and abide by the regulations and rules of the **UNIVERSITY and BIG RED SOCCER CAMP** as they pertain to said Activities and to reimburse and make good to the **UNIVERSITY and BIG RED SOCCER CAMP** any loss, damage, or cost the **UNIVERSITY and BIG RED SOCCER CAMP** may have to pay as a result of my participation in the program.

_____ _____ _____

RELEASOR (Signed) **RELEASOR (Printed)** Date

(Parent/guardian signature is required here)

_____ _____ _____

RELEASOR (Signed) **RELEASOR (Printed)** Date

(If Camper is age 18 or older, camper signature is required here in addition to parent/guardian signature above)

Return forms by:

- **Scan/E-mail to bigredsoccercamp@gmail.com**
- **Upload directly to registration site (link to login at https://campsself.active.com/BigRedSoccerCamp**
- **Mail to: Big Red Soccer Camp, One Memorial Stadium, Lincoln NE 68588-0168**