

**NIYA BUTTS BASKETBALL ACADEMY**  
*2010 Summer Camps*  
**RELEASE AND WAIVER OF LIABILITY**

As the parent or legal guardian of \_\_\_\_\_ (camper name), I give my consent for him/her to participate in the camp programs conducted and/or sponsored by the Niya Butts Basketball Camp. I understand that participation in basketball, and related activities involve certain risks, and may result in unavoidable injuries. The injuries may include muscle strains and tears, broken bones, and severe injuries including, but not limited to, permanent paralysis, or even death. I am fully aware of the risks and possibilities of injury involved and acknowledge that I am assuming the risk of such injury by my child's participating in the camp.

I further acknowledge that I will be responsible for any and all medical and related bills that may be incurred by me for any illness or injury that my child may sustain during the camp and while traveling to and from the site for the camp.

I further acknowledge and authorize the employees of the Niya Butts Basketball Camp to act accordingly to their best judgment in any situation requiring medical attention, whether an emergency or not, until such time as I am contacted to make decisions concerning my child's treatment. If in the judgment of a physician or designee it is necessary for health care reasons to proceed with treatment without delay, this treatment may proceed without prior notification of the undersigned, although every attempt will be made to notify me in the event of such an injury or illness. I agree that any medical information provided to this camp shall be released to other health care providers who may be providing care.

Knowing these facts and in consideration of my child's participation in the camp program, I, acting as parent or legal guardian, agree to release and hold harmless the respective officers, directors, representatives, members, agents, employees, coaches, or agents of the Niya Butts Basketball Academy, the coaches and support staff of the Arizona Women's basketball program, from any and all liability for negligence or any other claim, demand, action, judgment, loss, liability, cost and expenses (including without limitations, attorney's fees and costs) arising out of or in connection with the camp, including any claim arising out of or in connection with, whether directly or indirectly, any illness, injury, damage or loss to person or property that my child may incur or sustain during the camp, all activities associated with the camp, and while traveling to and from the site for the camp.

I further acknowledge and authorize the Niya Butts Basketball Academy the right to photograph my child and use the photo and/or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet.

I acknowledge that I have read this Release and Waiver of Liability in its entirety and fully understand its contents. I am aware that this Release contains an acknowledgement of my voluntary and knowing assumption of the risk of illness or injury. I further acknowledge that I have signed this document voluntarily and of my own free will.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**INSURANCE INFORMATION**

Insurance Company: \_\_\_\_\_

Insurance Company Address: \_\_\_\_\_  
\_\_\_\_\_

Insurance Company Phone Number: \_\_\_\_\_

Identification Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Policy Holder Full Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Name of Emergency Contact: \_\_\_\_\_

Phone Number of Emergency Contact: \_\_\_\_\_

*\*\*Emergency contact should be available to camp staff within 2 hours of initial phone call\*\**

***Please include a copy of the insurance card (front and back) with this form!***

***No camper will be allowed to participate without a completed waiver.***

***This form MUST be returned to our office before start of camp to ensure participation.***