## MINOR WAIVER/RELEASE RELEASE OF LIABILITY FOR MINOR PARTICIPANTS READ BEFORE SIGNING

IN CONSIDERATION OF	, my child/v	ward, being allowed to
participate in any way in the <b>Molly</b>	Name of Minor Child/Ward)  Marrin Basketball Camp related events ar	nd activities, undersigned
acknowledges, appreciates, and ag	rees that:	
	the activities involved in these programs is d while rules, equipment, and personal dis	=
	D, I KNOWINGLY AND FREELY ASSUME ALL THE NEGLIGENCE OF THE RELEASES or othe	
observe any unusual significant cor	he program's stated and customary terms ncern in my child's readiness for participation ation and bring such attention of the neare	on and/or in the program itself, I will
3. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS <b>Molly Marrin Basketball Camp</b> ; its directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.		
kin, HEREBY INDEMNIFY AND HOLD	d, and on behalf of my/our heirs, assigns, p O HARMLESS all the above Releasees from a se programs, EVEN IF ARISING FROM THEIF	any and all liabilities incident to my
	ave explained to my child/ward: the risks of ations, and that my child/ward understands	
other infectious diseases while at c	nd that there is some risk of my child(ren) of this camp. By registering my child(ren) for this catty procedures and waive all liability by <b>Mo</b> ansmission of infectious diseases.	amp and signing below, I am agreeing
RISK AGREEMENT, FULLY UNDERST	CHILD/WARD, HAVE READ THIS RELEASE OF TAND ITS TERMS, UNDERSTAND THAT WE IT FREELY AND VOLUNTARILY WITHOUT A	HAVE GIVEN UP SUBSTANTIAL
(PARENT/GUARDIAN SIGNATURE)	(PRINT NAME)	(Date Signed)
UNDERSTANDING OF RISK I unders	stand the seriousness of the risks involved	in participating in this program, my
	ng to rules and regulations, and accept the	
(PARTICIPANT SIGNATURE)	(PRINT NAME)	(Date Signed)