

O-D Lineman Academy Camp

RELEASE AND WAIVER FORM FOR CHILD PARTICIPATION - **REQUIRED**

As the parent/legal guardian of _____
(child's name), I/We understand that there are certain risks of injury inherent in participating in the O-D Lineman Academy Camp. I acknowledge that my child is healthy and has no physical or mental disabilities that would restrict his/her participation in the activities he/she may incur such as physical contact with other players or objects including the ground.

However, I understand there is always a risk of injury when playing sports with others. I specifically waive and release any O-D Lineman Academy Camp representatives, any and all collaborating agencies/organizations, sponsors, staff, or directors from any liability for any claim of damages which I/We or my child may have for injuries or illness that he/she may sustain, whether the result of gross negligence or any other causes.

(Print Child's name)

(Print Parent/Legal Guardians Name)

Signature

Date: _____

Date of birth: _____

PhoneNo: _____