

6. Insurance I/We represent that I have adequate health insurance necessary to provide for and pay any medical costs that may be attendant as a result of injury. I guarantee payment of all expenses incurred for transportation of participant to and receiving emergency medical treatment. I have completed and attached the "Medical Insurance Information" document and provided a copy of the medical insurance card to this Agreement.

THIS IS A RELEASE OF LEGAL RIGHTS, READ BEFORE SIGNING.

I acknowledge that I have carefully read this agreement and fully understand its contents. I acknowledge that I am voluntarily executing this agreement of my own free will. After having the opportunity to consult with legal counsel of my own choosing, I acknowledge and understand that this agreement will release the University of San Diego and its Releasees from any liability in connection with any injury or damages or losses suffered as a result of the Participant's participation in the above referenced Activity. It is my express intent that this release shall bind the members of Participant's family, estate, heirs, administrators, personal representatives, or assigns.

I acknowledge that I have been made aware of any and all risks of participation in this Activity, and I hereby approve of the Participant's participation in the Activity.

If participant is under age 18, complete the following:

I further state that I am the Participant's ____parent/ ____guardian, and am fully competent to sign this agreement; and that I execute this release for full, adequate, and complete consideration fully intending for myself, for the participant, and for the participant's family, estate, heirs, administrators, personal representatives, or assigns to be bound by same.

Participant Signature: _____ Date: _____
(If over age 18)

Parent/Guardian Name(please print): _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

These forms to be used only for registration less than 2 weeks prior to camp start date.
University of San Diego Summer Sports Camps Fax # 619-260-4185