

**Lowell Wrestling Club
2019 Summer Camp Registration**

Wrestler Name/s: _____

Birth Date: _____ Grade: _____ Phone Number: _____

Email Address: _____

RELEASE, ASSUMPTION OF RISK, AND INDEMNIFICATION AGREEMENT*

In consideration of my participation in this event and with the understanding that my participation in the event is only on the condition that I enter into this agreement for myself and my heirs and assigns, I assume the inherent and extraordinary risks involved in wrestling, in the use of the facilities and equipment provided to me, and in any other activities connected with this event in which I may voluntarily participate. I expressly assume the risk of and accept full responsibility for any and all injuries (including death) and accidents that may occur as a result of my participation in this event and release from liability Lowell Wrestling Club and its members, agents, representatives, and employees, and Lowell Area Schools and its Athletic Department, and their respective board members, agents, representatives, and employees. I waive any claim I may later have as a result of any and all injury to my person or property as a result of my participation in the event, my use of any facilities and equipment, and any other activities connected with this event in which I may voluntarily participate.

I agree to indemnify all of the persons named above for all claims, including attorney fees and costs, that may be brought against any of them by anyone claiming to have been injured as a result of any injury to me or my property that may occur as a result of the event. I also agree that this release and all its particulars include other individuals, volunteers, advertisers, participants, staff, sponsors, hosts, and other officials that are assisting with or connected to the event.

I understand that wrestling is a physical sport and that physical injury may result. ***I certify that I have read and fully understand this release.*** I am of lawful age and legally competent to make this agreement, or execute this agreement as parent or guardian on behalf of the participants listed above.

Parent/Guardian Signature: _____

Print Name: _____ Date: _____

Emergency Contact Phone Number: _____

*Wrestling activities for this event include the following:

- Camps, Practices, Wrestling technique instruction in private, individual sessions and practice situations, Competitions, Intense Wrestling, Strength and conditioning, including weight-lifting, speed and agility training