

2020 VICTORY KIDS

Activity Registration & Waiver and Release of Liability Form

Please fill out this application form completely (3 pages). One application per camper.

Participant Information

*** REGISTER ONLY IF YOU PLAN TO ATTEND ***

STUDENT-ATHLETES
3rd THRU 9th GRADE ONLY

Monday, February 17th _____

Name _____
First Last

Residential Parent/Guardian: _____
First Last

_____ *First Last*

Street Address _____

City _____ State _____ Zip _____

Email (clearly) _____

Grade in fall _____ Age _____ Date of Birth _____

T-SHIRT SIZE (Circle one) - Adult - XS - S - M - L - XL - XXL

Participant's School Information

Name of School _____

City _____ State _____

Youth Team Name _____

Coach's Name _____
Last First

Parent/Guardian Emergency Contact Information

Name _____
First Last

Name _____
First Last

Other (please state) _____

Cell # _____

Home # _____

Work # _____

Email _____

Medical Information

(Victory Kids Camp will NOT administer or store any drugs or medications for campers, nor will Victory Kids Camp administer over the counter medications to minors.)

- I Restrictions on Participation? ___ No ___ Yes
If Yes, explain _____
- II Medication allergies? (e.g. penicillin, sulfa, etc.) ___ No ___ Yes
If Yes, list medication(s) _____
- III Specific allergies? (e.g. bee-stings, certain foods, etc.) ___ No ___ Yes
If Yes, explain _____
- IV List, if any, prescription medication(s) you will have with you at camp? _____
- V Date of last tetanus shot _____
- VI Other information you feel we should know about camper: _____

Medical Insurance Required

Medical Insurance Company _____

Policy # _____

Group Name _____

Effective Date of Coverage _____

Policy Holder's Name _____

Policy Holder's Relationship to Camper _____

Medical Doctor: _____ Phone: _____

Equipment You Should Bring

1. Football Cleats and Tennis shoes In case of Rain
2. Bathing Suit & Towel (camps with water activities)
3. Suggested: water bottle/dry t-shirt/dry socks
4. Energy bar or similar snack
5. Sun Screen
6. Lunch: Lunch is not provided - Pizza, drinks and snacks available for purchase (if applicable)

Swimming Ability:

Allowed in water _____ Not allowed in water _____

Where did you hear about us?

School Flyer/Blast _____ Recreation Department Booklet _____
Friend _____ Previous Camper _____ Radio _____ News Paper _____
Other _____

WAIVER AND RELEASE OF LIABILITY

IN CONSIDERATION OF the risk of injury that exists while participating in VICTORY KIDS TRAINING CAMPS, SESSIONS or EVENTS (hereinafter the "Activity"); and

IN CONSIDERATION OF my desire to participate in said Activity and being given the right to participate in same;

I HEREBY, for myself, my heirs, executors, administrators, assigns, or personal representatives (hereinafter collectively, "Releasor," "I" or "me", which terms shall also include Releasor's parents or guardian if Releasor is under 18 years of age), knowingly and voluntarily enter into this WAIVER AND RELEASE OF LIABILITY and hereby waive any and all rights, claims or causes of action of any kind arising out of my participation in the Activity; and

I HEREBY release and forever discharge VICTORY KIDS, located at 715 Tides Rd, Vero Beach, Florida 32963, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns (collectively "Releasees"), from any physical or psychological injury that I may suffer as a direct result of my participation in the aforementioned Activity.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH PARTICIPATING IN THIS ACTIVITY, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO: PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL TO AND FROM THE ACTIVITY, OR FROM CONDITIONS AT THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN AND UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY.

I FURTHER AGREE to indemnify, defend and hold harmless the Releasees against any and all claims, suits or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney's fees and any related costs.

I FURTHER ACKNOWLEDGE that Releasees are not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event or activity on behalf of Releasees. In the event that I should require medical care or treatment, I authorize Victory Kids to provide all emergency medical care deemed necessary, including but not limited to, first aid, CPR, the use of AEDs, emergency medical transport, and sharing of medical information with medical personnel. I further agree to assume all costs involved and agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I am required to carry my own health insurance.

I FURTHER ACKNOWLEDGE that this Activity may involve a test of a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. I agree not to participate in the Activity unless I am medically able and properly trained, and I agree to abide by the decision of the Victory Kids official or agent, regarding my approval to participate in the Activity.

I HEREBY ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE VICTORY KIDS AND ALL OF ITS AFFILIATES, MANAGERS, MEMBERS, AGENTS, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS, REPRESENTATIVES, PREDECESSORS, SUCCESSORS AND ASSIGNS, FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST VICTORY KIDS FOR PERSONAL INJURY OR PROPERTY DAMAGE.

To the extent that statute or case law does not prohibit releases for ordinary negligence, this release is also for such negligence on the part of Victory Kids, its agents, and employees.

I agree that this Release shall be governed for all purposes by Florida law, without regard to any conflict of law principles. This Release supersedes any and all previous oral or written promises or other agreements.

In the event that any damage to equipment or facilities occurs as a result of my or my family's or my agent's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any such actions of neglect or recklessness.

THIS WAIVER AND RELEASE OF LIABILITY SHALL REMAIN IN EFFECT FOR THE DURATION OF MY PARTICIPATION IN THE ACTIVITY, DURING THIS INITIAL AND ALL SUBSEQUENT EVENT OF PARTICIPATION.

INITIAL _____

THIS AGREEMENT was entered into at arm's-length, without duress or coercion, and is to be interpreted as an agreement between two parties of equal bargaining strength. Both Participant, and Victory Kids agree that this agreement is clear and unambiguous as to its terms, and that no other evidence shall be used or admitted to alter or explain the terms of this agreement, but that it will be interpreted based on the language in accordance with the purposes for which it is entered into.

In the event that any provision contained within this Release of Liability shall be deemed to be severable or invalid, or if any term, condition, phrase or portion of this agreement shall be determined to be unlawful or otherwise unenforceable, the remainder of this agreement shall remain in full force and effect. If a court should find that any provision of this agreement to be invalid or unenforceable, but that by limiting said provision it would become valid and enforceable, then said provision shall be deemed to be written, construed and enforced as so limited.

RELEASE to use IMAGE and LIKENESS

On occasion, Victory Kids or its representatives takes photographs or makes an audio or videotape recording of students and/or adults involved in activities. Such photographs or video records may be used by staff and participants to remember the activities and participants.

Local news organizations may hear of our activities or events, and our organization may invite or allow them to photograph or record our events for news reporting on special interest features. I consent to the use of any such audio or visual record of the student named above to be used, distributed, or displayed as agents of the organization see fit. This consent includes but is not limited to photographs, videotape, and audio recordings. Furthermore, I give permission for the student to be interviewed by the news media, or for such photographs and other audio or visual records to be used by the news media. In addition, such photographs and audio/visual recordings may be used in publications or advertising materials to let others know about our activities. These images may also be used by Victory Kids, or its agents to produce resources for staff training, camps or other uses to promote the ministry of Victory Kids.

I REPRESENT THAT I AM THE PARENT/GAURDIAN OF

_____ who is under 18 years of age.

I have read the above Waiver and Release of Liability, Release to use Image and Likeness and Participant Registration Form and am fully familiar with the contents thereof. I give permission for the participant named above to participate in the activities of this organization, including any special events/activities described above. In consideration for allowing the participation of the participant in these activities, I hereby consent to the Participant Registration Form, including the Waiver and Release of Liability and Release to use Image and Likeness above, on behalf of the participant and agree that this Participant Registration Form shall be binding upon me, my family, heirs, legal representatives, successors, and assigns.

Signature of Parent or Legal Guardian

_____ Date _____

Print Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

_____ Date _____

Print Name of Parent or Legal Guardian

**E-mail completed form to: cathye@victory-kids.org fax to (772) 492-9695 or
mail to: Victory Kids - 715 Tides Road, Vero Beach, FL 32963**