



Hoop Hall Dreams Camp Injury Waiver And General Release

CAMPERS WILL NOT BE PERMITTED TO PARTICIPATE IN CAMP UNTIL THIS FORM IS SIGNED AND RETURNED BY CAMPERS LEGAL GUARDIAN

As a participant in the Hoop Hall Dreams Camp, dba "Camp", I acknowledge that participation in the camp exposes me to a possible risk of personal injury. I hereby release, The Hoop Hall Dreams Camp, The Basketball Hall of Fame, Basketbull LLC and any of its officers, directors, employees, agents, licensees, subsidiaries, consultants, independent contractors and affiliates from any and all liability for property damage, personal injuries or other claims arising from or in connection with my participation in the camp, including claims that are know and unknown, foreseen and unforeseen, future or continent.

I covenant that I will not now or at any time in the future, directly, or indirectly, commence or prosecute any action, suit, or other proceeding against The Hoop Hall Dreams Camp, The Basketball Hall of Fame, Basketbull LLC and any of its officers, directors, employees, agents, licensees, subsidiaries, consultants, independent contractors and affiliates, arising out of or relating to the actions, causes of action, claims, and demands hereby waived, released and discharged by me.

Date: _____

Participant: _____

Signature

Printed Name: _____

The undersigned ("Parent"), parent of _____ ("Subject"), hereby consent to affirm, and, on behalf of subject, agree to be bounds by the Injury Waiver and General Release Form attached hereto which has been signed by subject. Parents also represent, warrant and agree that Parents (is) (are) entitled to the care and custody of Subject and (is) (are) Subject's legal guardian(s); that during the minority of Subject and for reasonable time afterwards, Parents will use all reasonable efforts to prevent Subject from attempting to or actually disaffirming the Injury Waiver and General Release From signed by Subject; that Prents hereby acknowledge that Parents have read the Injury Waiver and General Release Form and are satisfied that it is fair and equitable for the benefit of the Subject; and that Parents will not revoke this consent and approval.

Date: _____

Parent: _____

Signature

Printed Name: _____