

ACKNOWLEDGEMENT OF RISK AND WAIVER OF LIABILITY

Both participant and parent/guardian must read this Acknowledgement of Risk and Waiver of Liability carefully and in its entirety. It is a binding legal document. This form must be signed by you as the participant AND by your parent or legal guardian.

I, the undersigned, am aware that participation in the University of Idaho Women's Basketball Camp ("Camp") may include activities that are risky and dangerous. Both participant and their parent/guardian ("I") acknowledge and accept the risks and give permission for the participation in the Camp. I acknowledge that participation in this Camp has the following non-exhaustive list of particular activities that bear risk and danger and from which bodily injury to myself or child, up to and including mortal injury, may occur: physical and sporting activities related to basketball including, but not limited to falling, lifting, bending, jumping, pulling, twisting, and competition in and/or practice of activities that involve strenuous exertion that could place stress on cardiovascular and/or musculoskeletal systems and result in broken bones, strain sprains, joint injuries, heart malfunctions, and head injuries; activities supplemental to the Camp such as sprinting, running and scrimmaging and or games; contact with environmental or biological hazards; use of facilities, roads, sidewalks, parking lots, and trails that may or may not be properly maintained; exposure to contaminated food and untreated water; staying overnight on campus in dorms; risk related to the rendering or receipt of emergency first aid, or other emergency treatment, and transport in medical emergencies; risks related to transit to or from the Activity locations including, but not limited to, travel by bus, van and private or rented auto; use or operation, by me or others, of equipment in the condition in which they are found; and other unknown and unanticipated activities and risks.

In consideration of the University of Idaho (UI) permitting me/my dependent to participate in the Camp, I and my dependent hereby voluntarily accept all risk associated with participation. To the extent permitted by law, I agree to identify, defend, save, hold harmless, discharge and release the State of Idaho, the Regents of the University of Idaho, their agents and employees from any and all liability, claims, causes of action or demands of any kind and nature whatsoever that may arise out of or in connection with my participation in any activities related to the above-named Camp. It is my express intent that this Acknowledgement of Risk and Waiver of Liability shall serve as a release, discharge and acceptance of risk for my heirs, estate, executor, administrator, assigns and all members of my family. The venue of any dispute that may arise out of my or my dependent's participation in the Camp, if the University is a party to the dispute, shall be in Latah County, Idaho. I understand that disregard for UI policies and applicable laws may be considered grounds for dismissal from the Camp, and prompt return home at my or my parent's expense.

I hereby certify that my dependent is in good health and I know of no medical reason why he/she is not able to participate in this Camp. I hereby consent to first aid, emergency medical care and if necessary, admission to an accredited hospital when necessary for executing such care, for treatment for injuries that he/she may sustain while participating in any activity associated with the above named camp. I understand that I am responsible for all medical expenses. I agree that you may photograph or video me in connection with the Activity. I agree that you shall be the exclusive owner of all images and all copyright and other rights in the images. I agree that you may use an image in any media you wish related to the University of Idaho.

If you DO NOT GIVE PERMISSION TO PRODUCE IMAGES, CHECK HERE ()

Camper's signature (In blue ink) _____

Parent / Guardian's signature (In blue ink) _____

Parent / Guardian - PRINT Name _____

Date _____

EMERGENCY CONTACT INFORMATION - PLEASE PRINT

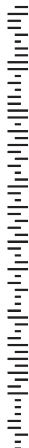
Name _____

Relationship to participant _____

Phones:

WORK _____ HOME _____ CELL _____

Place
Stamp
Here



University of Idaho
Women's Basketball
P.O. Box 442302
Moscow, ID 83844-2302

UNIVERSITY OF IDAHO VANDALS

NCAA TOURNAMENT APPEARANCES: 2013, 14, 16



WOMEN'S BASKETBALL CAMP



INDIVIDUAL CAMPS

JUNE 19-21, 2017

WOMEN'S BASKETBALL CAMP 2017

INDIVIDUAL CAMPS:

June 19-21, 2017

Idaho individual camps will take place in Memorial Gym on the University of Idaho Campus. Each Junior Vandal and Vandal camp participant will receive a Vandal Women's Basketball T-shirt and free admission to a Vandal women's basketball game during the 2017-18 season.

Junior Vandal Camp (grades 2-6) 9:00 a.m.-12:00 p.m.

Junior Vandal Camp is an opportunity for young girls to learn the fundamentals of basketball in a fun and competitive environment. Each day campers will do drills and play games related to dribbling, passing, shooting, and defense. This is a great opportunity for players to develop their skills while learning from current Vandal players and coaches.

*Check-in for Junior Vandal Camp will begin at 8:30 a.m. on Mon., June 19 in Memorial Gym.

Vandal Camp (grades 7-12) 1:00 p.m. - 4:00 p.m.

Vandal Camp is for athletes with a desire to grow and improve as basketball players. We provide middle school and high school players an arena to learn, practice, and develop the offensive and defensive fundamentals used by the Idaho Women's Basketball Team. Daily campers will have the opportunity to work with current Idaho coaches and players on their basketball skills as well as compete in drills, one-on-one, and live situations.

*Check-in for Vandal Camp will begin at 12:30 p.m. on Mon., June 19 in Memorial Gym. All Camps are open to any and all entrants



Karlee Wilson
Camp Counselor

Registration forms are available at
www.vandalcamps.com

For more info, please contact
Steven Fennelly at (208) 885-0203
Cell: (515) 451-1755
Email: sfennelly@uidaho.edu



Brooke Reilly
Camp Counselor



UNIVERSITY OF IDAHO

INDIVIDUAL CAMPS (June 19-21)

___ Junior Vandals \$100 per athlete

___ Vandal Camp \$100 per athlete

Name _____

Date of Birth _____ Grade _____

Address _____

City _____ State _____ Zip _____

Telephone _____

E-mail _____

School _____

Head Coach's Name _____

Parent/Guardian Name _____

T-Shirt Size (circle one) YS YM YL M L XL

Payment

*If you are a member of a team that is coming to camp, you will give your payment directly to your head coach.

*If you are coming to camp on your own, send check or money order payable to:

UI Women's Basketball Camp
C/o Steven Fennelly
P.O. Box 442302
Moscow, ID 83844-2302

Make sure your name is included so we can distinguish who the payment is for.

Insurance Information

*Please bring a copy of insurance card.

Policy Holder _____

Policy Holder's Date of Birth _____

Policy # _____

Policy Holder's PH# _____

Insurance Company _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Insurance ID/Group Number(s) _____

Policy Effective Date: _____