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Street Montgomery, AL 36104

## RELEASE OF LIABILITY

(For a Minor - Under the Age of 19)

I, \_\_\_\_\_, hereby certify that I am the parent and or legal

guardian of \_\_\_\_\_, D.O.B. \_\_\_\_\_, a minor child under the age of 19 years old, and I consent to his/her participation in the 2019 camp/program being held on the campus of Alabama State University. I understand that participation in this camp and any related activities may involve certain risks and dangers which are known and unknown to me and may result in injuries to the above-named minor. I am fully aware of the potential risks and possibility of injury involved with said camp and any related activities and acknowledge that I, personally and on behalf of the minor child named above, assume the risk of such injury by allowing the above-named minor to participate in the camp and any related activities.

I further acknowledge that I have health insurance and will be responsible for any and all medical and related bills that may be incurred by the above-named minor child's participation, including any illness or injury that he/she may sustain during the camp and any related activities.

I further acknowledge and authorize the employees or agents of Alabama State University to act according to their best judgment in any situation requiring medical attention for the above-named minor child, whether an emergency or not.

Knowing these facts and in consideration of the participation in this camp and any related activities, I myself, my heirs, my estate, my executors and administrators hereby release, discharge and indemnify Alabama State University, its officers, directors, Board of Trustees, representatives, and employees, from any and all liability, for negligence or any other claim, demand action, judgment, loss, liability, cost and expenses (including without limitations, attorney's fees and costs) arising out of or in connection with the above camp and any related activities directly or indirectly, including, but not limited to, any illness, injury, damage or loss to person or property that I may incur or sustain during the camp and any related activities.

I acknowledge that I am at least nineteen years of age and have carefully read this Release of Liability in its entirety and fully understand its contents. I am aware that this Release contains an acknowledgment of my voluntary and knowing assumption of the risk of illness or injury for the above-named minor child. I further acknowledge that I have signed this document voluntarily and of my own free will. I agree that this agreement shall be governed by the laws of the State of Alabama.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Emergency Contact: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_