

# Scholar AthELITE Summer Camp Release Form

I have requested Scholar AthELITE Company to allow (camper name) to participate in Scholar AthELITE Summer Camp activities . As a condition of receiving this benefit, I, the undersigned, do hereby agree to the following:

I understand that my participation in this activity can expose me to dangers both from known and unanticipated risks. Acknowledging that such risks exist, I hereby release and discharge Scholar AthELITE Company , its officers, agents, and employees from any and all claims or liability for personal injury or property damage I may suffer while participating in the activity; including, but not limited to, any claim arising out of any condition of the premises at which the activity is held or the conduct of any person in connection with the preparation for, supervision of, or conduct of any activity, whether planned or unplanned. I specifically agree to release and hereby release Scholar AthELITE Company and the officers, agents, and employees of the camp for any negligence of the camp, or its officers, agents or employees.

\_\_\_\_\_  
Camper Name (Printed)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Name(s) Printed

