

Waiver and Medical and Photo Release:

**GRIND WEEK BASKETBALL CAMPS**

**9/15/2018**

Waiver and Medical Release

The named participant \_\_\_\_\_ has my permission to participate in the above designated sports camp. In case of emergency, I understand that every attempt will be made to contact the emergency contact listed for the registered camper. If contact is unsuccessful, I give permission for the certified athletic trainer on duty to render medical treatment to the participant, including (if necessary) hospitalization. Any expense incurred is the responsibility of the person registering their camper, that person being a parent or legal guardian (must be over 21 years of age) of the child requesting admittance to Grind Week Basketball Camp 2018 does hereby affirm that the participant is in good health, and suffers from no illness or disability that requires the taking of medication on a regular basis unless that condition is disclosed during registration and approved. Furthermore, the undersigned has no knowledge of any reason the applicant cannot participant in vigorous physical activity.

I understand that, as a condition of admittance as a participant, the undersigned, on behalf of all parents and guardians, and on behalf of the participant, hereby release Draymond Green, ALL IN ONE Consulting LLC, Solider's Town/Jamtown, and all other employees or agents of the clinic from any liability from any loss or damage of personal property, injury or illness, mental or physical suffered by the participant during or related to the camp.

Participants in the DG Grindweek Basketball Camp (herein known as DGGW) program are sometimes photographed and videotaped for use in promotional and educational materials. I authorize Draymond Green, All In One Consulting/All In One Sports, and DGGW camp staff to record and photograph my image and/or that of my child for use by Draymond Green or DGGW camp in research, educational and promotional programs. I understand these audio, video; film and/or print images may be edited, duplicated, distributed, reproduced, broadcast, and/or reformatted in any form and manner without payment of fees.

By signing below, I acknowledge that I have read, understand, and knowingly give consent to DGGW camp to use any photos, audio, and videos of the participant in research, educational and promotional programs without payment of fees.

\_\_\_\_\_  
Parent/ Guardian Name

\_\_\_\_\_  
Date

