

# Passion with Purpose Athletics Ltd Basketball Player Development Waiver Form

(MUST BE SIGNED AND BROUGHT WITH YOU TO REGISTRATION)

Name of Camper \_\_\_\_\_ Date \_\_\_\_\_

## WAIVER, RELEASE OF LIABILITY AND ASSUMPTION OF RISKS

**PLEASE READ THIS "RELEASE" CAREFULLY BEFORE SIGNING. THIS IS A LEGALLY BINDING DOCUMENT. IT MUST BE FULLY SIGNED AND SUBMITTED BEFORE YOU ARE ALLOWED TO PARTICIPATE.**

I, the undersigned, wish for my child \_\_\_\_\_ (Hereafter "Child") to participate in the Passion with Purpose Athletics Ltd Basketball Player Development Sessions (hereafter "PPA Basketball PD") on the dates, times and location as indicated above and, in consideration for my Child's participation, I hereby agree as follows:

I understand that PPA Ltd is operated as an individual enterprise and is not owned, sponsored, or operated by Jefferson County Schools, Standley Lake High School, or the Zehnder Family Gymnasium and Property (hereafter "The Barn") and that Jefferson County Schools, Standley Lake High School, The Barn and/or PPA Basketball PD do not provide any accident or health insurance coverage while participating in this camp. I fully understand that it is my/our responsibility to provide insurance coverage for my son/daughter. I am aware that PPA Basketball PD involves competition and sometimes physical contact with and against other participants and that there are inherent dangers and risk of injury involved with such activities. The dangers, hazards and risks may arise from my Child's own actions, inactions, or negligence as well as from the actions, inactions or negligence of others, or the condition of the premises. I also acknowledge and understand that there may be other dangers, hazards or risks not presently known or reasonably foreseeable. Participation in PPA Basketball PD includes travel to and from the sessions. Therefore, I, for myself and on behalf of my Child, voluntarily accept and assume all risk of injury, loss of life or damage to property arising out of training, preparing, participating and traveling to or from PPA Basketball PD. I acknowledge that specialized experience and skills may be necessary to participate in PPA Basketball PD and I confirm that my Child possess such experience and skills. I understand that physical exercise is required for this camp. I acknowledge that my Child is currently not suffering from, nor has he/she previously suffered from, any physical and/or mental disability which would preclude him/her from participation in PPA Basketball PD, that would endanger him/her or others or would interfere with his/her ability to safely participate. I acknowledge and agree that it is the responsibility of me and my Child to determine whether my Child is sufficiently fit and healthy to safely participate in PPA Basketball PD, and I attest and certify that he/she is sufficiently fit and physically trained.

I hereby release Jefferson County Schools, Standley Lake High School, The Barn and the entity known as **Passion with Purpose Ltd (PPA Ltd)** and all of its coaches, employees, volunteers and agents (hereafter "Camp Operation") from any and all liability as to any right of action that may accrue to me, or my Child's, heirs or representatives, for any injury or loss that I or my Child may suffer while training, preparing, participating and/or traveling to or from PPA Basketball PS. This agreement is binding on the heirs and assigns of me and my Child. To the extent that my Child engages in activities that are not a part of PPA Basketball PD and from which he may sustain injury or damages, or cause others to be injured or sustain other damage, I understand that Jefferson County Schools, Standley Lake High School, The Barn and Camp Operation will not be held responsible.

I furthermore release, indemnify and hold harmless Jefferson County Schools, Standley Lake High School, The Barn and Camp Operation from and against any and all liability, actions, debts, claims and demands of every kind whatsoever, specifically including, but not limited to, any claim for negligence or negligent acts or omissions and any present or future claim, loss or liability for injury to person or property that I or my Child may suffer, for which I or my Child may be liable to any other person, that may or does arise out of my Child's participation in PPA Basketball PD.

In the event of an accident or serious illness, I hereby authorize representatives of Camp Operation to obtain medical treatment for my Child. I hereby hold harmless and agree to indemnify Jefferson County Schools, Standley Lake High School, The Barn and Camp Operation from any claims, causes of action, damages and/or liabilities, arising out of or resulting from said medical treatment. I further agree to accept full responsibility for any and all expenses, including medical expenses that may derive from any injuries that may occur to my Child during his/her participation in PPA Basketball PD. This RELEASE shall be governed by and construed under the laws of Colorado. I agree that any legal action or proceeding relating to this RELEASE, or arising out of any injury, death, damage or loss as a result of my participation in any part of PPA Basketball Camp, shall be brought only in Jefferson County, Colorado.

**This RELEASE contains the entire agreement between the parties to this agreement and the terms of this RELEASE are contractual and not a mere recital. The information I have provided is disclosed accurately and truthfully. I have been given ample time to read this document and I understand and agree to all of its terms and conditions. I understand that I am giving up substantial rights (including my right to sue), and acknowledge that I am signing this document freely and voluntarily, and intend by my signature to provide a complete and unconditional release of all liability to the greatest extent allowed by law. My signature on this document is intended to bind myself and my Child and the successors, heirs, representatives, administrators, and assigns of myself and my Child.**

### SIGNATURE IS REQUIRED:

Participant's Name \_\_\_\_\_ Date \_\_\_\_\_

Participant's Signature \_\_\_\_\_

Parent/Legal Guardian's Name \_\_\_\_\_

Parent/LegalGuardian'sSignature \_\_\_\_\_ Date: \_\_\_\_\_

## Zehnder Family Gymnasium and Property Use Waiver

- Participation in athletic events and physical activities involves certain risks. The Zehnder Family, associates and Jefferson County School District will not assume responsibility for any injury while on the Zehnder Family's properties. It is also understood that there are no medical facilities, trainers, or medical personnel. Participant and or their guardians will be responsible for any medical attention needed.
- It is understood that athletic activities can be strenuous. It is the participants' responsibility and or their guardians to assure that they are hydrated at all times.
- Zehnders, associates and/or Jefferson County School District will not be liable for lost or stolen items while participants and their family members or friends are on the Zehnder properties.
- I, the below signed, for myself, my heirs and assigns hereby release the Zehnder Family, associates and Jefferson County School District, its sponsors, employees and volunteers from all claims for injury, death, loss or damage, I, or members of my family may suffer as a result of my participation or use.
- Parking lot- I waive the Zehnder Family, associates, Jefferson County School District for any liability as a result of any accident or injury involving automobiles while in the parking lot, on the driveways, or on the Zehnder properties.

### General Property Waiver

I understand that the Zehnder gym and facilities are donated for the use of basketball and other sport activities. I further understand that the owners of the property will not be responsible for any injuries in the parking areas or gym or anywhere on the premises from anyone that is on or utilizing the premises. This includes anyone dropping off or picking up participants. This also includes any younger or older individuals that may be on the premises due to these activities.

It is further understood that this is a family farm and that there are inherent dangers. The list below is not an all inclusive list but is listed here to assist participants.

1. Poor lighting (Bring a flashlight or means of walking in the dark).
2. During winter ice can form around outside faucets, be extremely cautious around such faucets. Ice can be slippery!
3. Sliding snow off metal roofs. Stay at least 3 feet clear of barn roofs.
4. If snow and ice are in parking area and driveways, enter at your own risk. Parking areas and driveways are not always plowed. If in your judgment the parking areas or driveways are not safe due to weather conditions. Do not enter.
5. Irrigation ponds are not fenced. All individuals are expressly prohibited from being on or in ponds. Parents are required to monitor their children and keep them away from the ponds.
6. Moving vehicles in the parking areas and driveways before and after practices can be dangerous. Escort all children in the parking or driveway areas.
7. Owners will not be responsible for any lost or stolen items.
8. Owners will not be responsible for any damage of any kind to any vehicles on the premises.
9. Maximum speed for vehicles is 10 mph.

By signing below I agree to all the conditions stated above. I further agree that I will be responsible for any other persons picking up or dropping off my children. I will be responsible for informing them of all conditions for using these facilities. I have health and vehicle insurance coverage and will utilize my insurance should any injuries or damage occur while at Zehnder property. I have read this general property waiver and the participation waiver and agree to all terms and conditions set forth in both waivers.

Participant Name Printed \_\_\_\_\_

Participant signature \_\_\_\_\_

### Guardians or Parents

Printed Name \_\_\_\_\_

Printed Name \_\_\_\_\_

Signed Name \_\_\_\_\_

Signed Name \_\_\_\_\_

LIABILITY RELEASE FORM

Zehnder Family Gymnasium and Property Use Waiver

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Participant Name Printed \_\_\_\_\_

Participant signature \_\_\_\_\_

**Guardians or Parents**

Printed Name \_\_\_\_\_

Printed Name \_\_\_\_\_

Signed Name \_\_\_\_\_

Signed Name \_\_\_\_\_