

Release of Liability for Participation

I, the undersigned camper, or parent/legal guardian, hereby consent, or give my consent for the camper, to participate in activities associated with Memphis Baseball Camps, to include specific sport activities and recreational activities conducted during camp. By signing this release, I acknowledge and understand that I/the camper will voluntarily engage in physical activity during the program which contains inherent risk of physical injury, and the undersigned assumes all risk. In exchange for participation, I hereby agree to indemnify and release the University of Memphis, the State of Tennessee, its agents, Board of Trustees, employees, representatives, sponsors, affiliates, parties permitting use of property for the program/camp, Matt Riser Baseball Camps LLC, its Baseball camp officers, directors, agents, volunteers, medical staff, and employees as well as any third-party facility owners, managers, and stewards from any and all liability for personal injury and/or property damage arising out of my/the camper's participation in the camp program. If at any time it is necessary for me/the camper to receive outside or professional medical attention, I hereby give my consent to the camp to secure the services and arrange the transportation if deemed necessary.

Medication Administration Waiver

I, the undersigned camper, or parent/legal guardian, hereby acknowledge that camp personnel are not trained medical professionals and shall not be responsible for a satisfactory outcome of the administering of any medication. In consideration of my/my child's participation in the program/camp above, I warrant and acknowledge that I have/my child has received a physical examination in the past twelve (12) months and the result of such physical examination was that I am/my child is physically capable of participating in the program/camp with no restrictions, medical or otherwise. I hereby for myself, my child, our executors, administrators, and assignees assume all risks including COVID-19 and hold the University of Memphis, the State of Tennessee, its agents, members of the Board of Trustees, employees, representatives, sponsors, affiliates, parties permitting use of property for the program/camp, coordinating groups, volunteers, and any individuals associated with the program/camp harmless from any and all liability, causes of action, debts, claims, damages, or demands of any nature whatsoever which may arise in connection with my child's participation in activities related to the program/camp.

I, the undersigned camper, or parent/legal guardian, acknowledge by signing this release that I have read and understand the terms contained within and I have voluntarily executed the same.

If participant is less than eighteen (18) years of age, parent/legal guardian must sign.

\_\_\_\_\_  
Printed Name of Camper/Participant

\_\_\_\_\_  
Printed Name of Parent/Legal Guardian

\_\_\_\_\_  
Signature of Camper/Participant

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date