

# NEWPORT HARBOR FOOTBALL

2017 SUMMER CAMP APPLICATION

June 26, 2017 through July 19, 2017 Monday through Friday

Varsity/JV: 7:30 am - 11:00 am | Freshman: 11:00 am - 1:00 pm

# \$600 Non-Refundable Payment Due by June 19, 2017 \*\* Installment Payments Available \*\*

#### REGISTRATION FORM:

Return this form with your payment. (Check/On-line) (Please make checks payable to: Newport Harbor Football Boosters)

ATHLETE'S NAME:		_ Shirt Size:	S N	1 L	XL	XXL
AGE:	GRADE 2017 :					
PARENT:						
PHONE:	EMAIL:					

Mail Registration to:

Newport Harbor Football Boosters 2017 Summer Camp PO Box 1533, Newport Beach, CA 92663

Contact: Jim Shollin at 951-710-0955 president@newportharborfootball.org with questions

ATHLETES MUST HAVE A CONSENT TO PARTICIPATE (WAIVER) FORM SIGNED AND RETURNED TO BOOSTERS BEFORE PLAYER CAN ATTEND CAMP.

Online Payments, visit the website: www.newportharborfootball.org





## NEWPORT HARBOR FOOTBALL BOOSTERS

## CONSENT TO PARTICIPATE, ASSUMPTION OF RISK, AND WAIVER OF LIABILITY AGREEMENT

PARTICIPANT'SNAME:		SHIRT SIZE: M L XL	XXL
ADDRESS:			
PARENT/GUARDIAN'S NAME:			
PHONE:	EMAIL:	Age/Gra	ade:
This Consent to Participate, Assumption of Riand on behalf of the minor participant ("Particimembers, agents, contractors, sponsors, venother.	ipant"), on the one hand, and Newport F	Harbor Football Boosters, its director	rs, officers, employees, volunteers,
In consideration for the privilege of the Partici or Guardian acknowledge and agree as follow		r Football Boosters' 2017 Summer C	Camp ("Camp"), Participant and Parent
1. Fitness to Participate. Participation ("Activities"), may involve physical contact, record Guardian assure, represent and warrant the or Guardian cannot assure the fitness of the Ffurther participation in the Activities. Participar Health History Form, and Code of Ethics – Padepartment.	at the Participant is able and qualified to Participant, or determines the conditions nt and Parent or Guardian further assur	be hazardous or dangerous to Partico participate in Activities, and if at an s to be unsafe to Participant, Particip e, represent and warrant that the rec	icipant. Participant and Parent by time the Participant, Parent ant will immediately discontinue quired NMUSD Activities Certificate,
2. Risk of Injury. Participation in Activit damaged organs, tissues and muscles, ligamis spectators, equipment, field, facility and/or fixe and defects in equipment and facilities; irregul participation. Risks may be caused by the Par in which the Activities take place, and/or the neconomic losses either not known to or not re	ed objects; falls, collisions, rough play, a lar field conditions; and negligent field n rticipant's own actions, or inaction, the a regligence of NHFB. Some Risks canno	nd death. Risks may arise out of physicand other mishaps; exposure to adventage to adventage and the manage of the participar actions or inaction of other participar	sical contact with other participants, erse weather conditions; flaws egligent coaching and negligent ats, the condition of the facilities
<ol> <li>Assumption of the Risk. I consent to costs, and damages to Participant as a result</li> </ol>	o participation in the Activities, and I full of such participation.	y accept and assume all such risks a	and all responsibility for all losses,
4. Waiver of Liability. The undersigned NHFB from any and all liability, demands, loss for negligence, expressed or implied warranty broadest extent permitted by California law, st personal injury and other injury or harm, disabas caused or alleged to be caused in whole or person makes a claim on the Participant's betharmless, NHFB from any liability, litigation exwhether asserted by the undersigned, the Participant in the participant is the participant in the participant in the participant is the participant in the part	r, contribution, and indemnity, and/or cla uffered by the Participant, Parent or Gua pility, and/or death, or property damage, r in part by NHFB or any of them, and fu half against NHFB based upon or relatir spenses, attorneys' fees, losses, damag	es, damages and attorneys' fees and tims of negligent rescue operations, ardian, or incurred on Participant's a arising directly or indirectly from the urther agrees that if, despite this Corn ng to any of the Activities, the unders	costs stemming from any or all claims first aid, and emergency care, to the account with respect to the Participant's Participant's participation in Activities asent, the Participant or any other signed will indemnify, save and hold
5. Governing Law, Venue and Arbitrati as permitted under California law. Any dispute interpretation, or validity thereof, including the in Orange County California before one arbitra Arbitration Rules and Procedures. Judgment of provisional remedies in aid of arbitration from	e determination of the scope or applicab ator, applying California law. The arbitra on the award may be entered in any cou	relating to this Consent or the breacl illity of this agreement to arbitrate, sh ttion shall be administered by JAMS	n, termination, enforcement, nall be determined by arbitration pursuant to its Comprehensive
6. Severability. If any provision of this other provisions, which other provisions shall PARENT/GUARDIAN OF THE PARTICIPANT SUFFICIENT TO CONSENT TO THE PARTIC OF THE PARTICIPANT.	, AND I ATTEST THAT I HAVE LEGAL F	Consent had been executed with the RESPONSIBILITY OVER THE PAR	invalid provision eliminated. I AM A FICIPANT, AND, MY SIGNATURE IS
I CERTIFY THAT THE PARTICIPANT IS UND TERMS, AND THAT PRIOR TO SIGNING TH ADVICE OF MEDICAL AND LEGAL PROFES THE VARIOUS SUBSTANTIAL RIGHTS AS S CONSERVATORS, EXECUTORS, ADMINIST	IS CONSENT, I HAVE HAD THE OPPOSSIONALS. I AM AWARE, BY SIGNING SET OUT ABOVE, THAT I, THE PARTIC	DRTUNITY TO ASK ANY QUESTION THIS CONSENT, I ASSUME ALL R CIPANT, AND EACH OF OUR HEIRS	IS ABOUT IT, AND TO SEEK THE ISKS AND WAIVE AND RELEASE S, FAMILY, RELATIVES, GUARDIANS,
Parent/Guardian Signature		Date	_

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