

# Summer Mentorship Camp 2017

## Waiver

As consideration for my participation in the Tennis Patrons of Santa Barbara, Inc's (herein "Tennis Patrons") Summer Junior Tennis Mentorship Program (the "Program"), I agree as follows:

1. I wish to voluntarily participate in the Program at Santa Barbara High School or such other location as the Program shall be operated (the "Facility"). I understand the physical dangers and risks inherent in the Program and hereby attest that I am physically able to participate in the Program, and I assume freely all of such risks including, without limitation, risks of personal injury. I understand that I may stop participating in the Program at any time. Any fees paid will not be refunded, but at the sole discretion of the Program Directors can be prorated depending on reasons.

2. I understand that I should consult with my physician before beginning this or any other athletic or fitness program and that the instructions and advice presented in connection with the Program are in no way intended as a substitute for medical advice.

3. I hereby release and hold harmless, on behalf of myself and my heirs and representatives, the Tennis Patrons of Santa Barbara, Inc, the instructors, the Facility, and all of their affiliated associations, officers, directors, employees, members, and agents (collectively, the "Releasees") from all claims, damages, costs and liabilities, whether known or unknown, anticipated or unanticipated, (herein "Claims") that I have or may ever have relating in any way to my participation in the Program, and I agree that I will not bring any suit, claim or action against the Releasees for any reason. I further agree to hold harmless and indemnify Releasees as to any attorney fees and costs incurred with reference to the defense of such Claims.

4. I have read this form prior to signing it and fully understand its contents and the nature of the Program. Any questions I might have had have been answered to my satisfaction. I freely agree to the terms of this form. If I am a parent or legal guardian signing this form on behalf of a minor, I acknowledge and agree that all agreements and releases herein are regarded as made by me on behalf of the minor and are binding on me and the minor.

\_\_\_\_\_  
Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Print Camper or Mentors Name

\_\_\_\_\_  
Signature of Parent/Legal Guardian if Participant is under the age of majority in his/her state of residence Date: \_\_\_\_\_



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

Contact Information:  
Phone # \_\_\_\_\_  
Address: \_\_\_\_\_  
In case of emergency I am unable to get in contact with please call:  
Name \_\_\_\_\_ Phone # \_\_\_\_\_