

# lea henry camp of champs

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
SCHOOL ATTENDING: \_\_\_\_\_  
PARENT / GUARDIAN NAME: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

WEEK 1: JULY 6-9, 2020 DWS GYM \_\_\_\_\_

WEEK 2: JULY 13-16, 2020 DWS GYM \_\_\_\_\_

I WILL BE ATTENDING BOTH WEEKS: \_\_\_\_\_

## L&G CAMP OF CHAMPS, INC. RELEASE – WAIVER FORM

### RELEASE/WAIVER OF LIABILITY & COVENANT NOT TO SUE

(Read carefully before signing)

For and in consideration of L&G Camp of Champs, Inc. arranging for my child,

\_\_\_\_\_, to participate in the Lea Henry Camp of Champs basketball camp at the Deerfield-Windsor School during the weeks of July 6-9, 2020 and/or July 13-16, 2020. I hereby release and covenant not to sue L&G Camp of Champs, Inc., the employees, officers, members, and agents of each from all claims, demands, rights and causes of action of whatever kind or nature, including but not limited to, negligence, arising from and by reason of any and all, known and unknown, foreseen and unforeseen, bodily and personal injuries, damage to property, and the consequences thereof, resulting from my child's participation in or in any way connected with the aforementioned camp.

I understand it is my responsibility to evaluate the condition of my child's health in relation to the demands of the Lea Henry Camp of Champs basketball camp. If uncertain, I will consult with a family physician. Further, I understand that the L&G Camp of Champs, Inc. does not provide health insurance for clinic participants and that I am responsible for obtaining adequate insurance for the eventuality of any injury or illness to my child as a result of this camp.

I hereby certify that I am the parent or legal guardian of \_\_\_\_\_, and suffering under no legal disabilities, and that I have read the above carefully before signing.

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

\_\_\_\_\_  
Emergency Contact

\_\_\_\_\_  
Emergency Contact Number

\_\_\_\_\_  
Parent's – Guardian Signature

### PAYMENT METHOD:

Please make checks payable to L&G Camp of Champs, Inc.

Deposit of \$50.00 is required.

Mail to: Lea Henry 107 Browning Court Leesburg, GA 31763