

ERNIE SIMS 50

Youth Football & Cheer Clinic

Friday, July 8, 2011 (9:00 a.m. – 1:00 p.m.)

Springsax Recreation Park

1000 Springsax Drive, Tallahassee, FL

The camp is free for all registered kids ages 7-18.

T-shirts given to the 1st 350 registered kids, so get your forms in early!

Attire – Please wear shorts, t-shirts and football cleats, training, or running shoes

Registration Form

PLEASE COMPLETE BOTH REGISTRATION AND WAIVER FORM (PLEASE PRINT):

Please indicate which clinic you wish to attend

Football Cheerleading

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____ Emergency Phone: _____

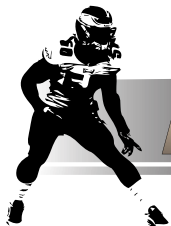
Age: _____ Birthdate: _____ Height: _____ Weight: _____

Parent or Guardian Email Address: _____

Position (*please circle*): Offense: QB WR RB TE OL

Defense: LB CB S DL P/K

T-Shirt Size: _____ (adult sizes only S - 2XL)



ERNIESIMS50.COM

Mail registration and release/waiver form to:

Ernie Sims Youth Football Camp

1770 Newman Lane

Tallahassee, Florida 32312

For more information, please contact:

Alice Sims alicebsims@comcast.net

Cassandra Leland cassandra.leland@talgov.com

Brian Smatt brian.smatt@talgov.com



RELEASE AND WAIVER OF LIABILITY AND PARENTAL CONSENT AGREEMENT

("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in the Ernie Sims Youth Football Camp ("CAMP") activity, I or my legal guardian or parent, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the CAMP activity and that I am qualified (in age and health), in good health, and in proper physical condition to participate in such Camp activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Camp activity.

2. FULLY UNDERSTAND that: (a) CAMP ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE Ernie Sims III, The Ernie Sims Big HITS Foundation, Inc. their respective administrators, clients, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place (Tallahassee Parks & Recreation Department and Springsax Park), (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: _____ (emergency contact phone #)

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____
(only if participant is under the age of 18)

MINOR RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF the CAMP ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: _____ (emergency contact phone #)

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____
(only if participant is under the age of 18)