

# Northern Colorado Volleyball Team Camp ATHLETE RELEASE 2020

This form must be turned in at check-in for each athlete prior to participating. Any athletes who are added after team check-in must be handled with tournament director.

Name of athlete: \_\_\_\_\_

School: \_\_\_\_\_ Coach: \_\_\_\_\_

Emergency contact name: \_\_\_\_\_ Emergency contact phone #: \_\_\_\_\_

*\*It is highly suggested that the coach of each team have the insurance information for each athlete with them at camp in case of an emergency.*

**READ THIS DOCUMENT COMPLETELY BEFORE SIGNING. ITS EFFECT IS TO RELEASE THE UNIVERSITY OF NORTHERN COLORADO FROM ANY LIABILITY RESULTING FROM YOUR PARTICIPATION IN THE ACTIVITIES DESCRIBED BELOW AND WAIVES ALL CLAIMS FOR DAMAGES OR LOSSES AGAINST THE UNIVERSITY.**

## **RELEASE FROM RESPONSIBILITY, ASSUMPTION OF RISK AND WAIVER**

In consideration of my being permitted by the University of Northern Colorado to participate in the Lyndsey Oates UNC Volleyball Camps on the campus of the University of Northern Colorado and local gymnasiums August 1-2, 2020, I, \_\_\_\_\_, exercising my own free choice to participate voluntarily in the above-named activities, and promising to take due care during such participation, hereby release and discharge, indemnify and hold harmless the State of Colorado acting through the Board of Trustees of the University of Northern Colorado, and their officers, agents, employees, and any other persons or entities acting on their behalf, and the successors and assigns for any and all of the aforementioned persons and entities, against all claims, demands, and causes of action whatsoever, either in law or in equity, relating to injury, disability, death or other harm, to person or property or both, arising from my participation in and/or presence at the above-listed activities.

I acknowledge that I am aware of any hazards and risks which may be associated with my participation in the above named activities and am unaware of any health issues that would preclude participation. I understand, accept, and assume those hazards and risks, and waive all claims against the State of Colorado acting through the Board of Trustees of the University of Northern Colorado, and other persons as set forth above. I understand that I am solely responsible for any costs arising out of any bodily injury or property damage sustained through my participation in normal or unusual acts or conduct associated with the above named activities.

I give my permission to use any images/sound/voice in any media for any purpose (except defamatory or pornographic) which may include advertising, promotion, and marketing. I agree that the images may be combined with other texts, images and graphics, and cropped, altered or otherwise modified. I agree that I have no rights to the images and I have no further right to additional consideration or accounting and thank I will make no further claim for any reason.

I have had sufficient time to review and seek explanation of the provisions contained above, have carefully read them, understand them fully, and agree to be bound by them. After careful deliberation, I voluntarily give my consent and agree to this Release, Assumption of Risk and Waiver.

Signature of person whose printed name appears above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If student is under the age of 18, his or her parent or legal guardian must also sign.

I, (printed name) \_\_\_\_\_, am the parent or legal guardian of the student who has signed above. I have read and understand the provisions of this document, I consent to the student participating in the activities described above, and I fully enter into and agree to the above Release Form Responsibility, Assumption of Risk and Waiver.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

**Lyndsey Oates Volleyball Camps, LLC Waiver of Liability**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact, including individuals without disease symptoms. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited or limited the congregation of groups of people.

The health and well-being of our staff and campers remains our top priority. In order to minimize the risk of COVID-19 entering our environment and spreading amongst our community, we will only allow staff assigned to work and athletes scheduled to participate to be in our gym. Parents wishing to remain on site can use outdoor common areas or the parking lot to wait for their athlete(s). Athletes waiting to attend a session will need to wait outside while maintaining social distance from others.

Furthermore, all participants in sponsored activities in relation to Lyndsey Oates Volleyball Camps, LLC must agree to and abide by the following:

- ALL members are required to wear face coverings or masks into the building
- Symptom Checks and Temperatures will be performed before anyone can enter the gym (Anyone with symptoms or temperatures over 99.9oF will be sent home)
- Physical distancing of at least 6'
- All members will be required to sanitize their hands before, during, and after sessions
- Do not come to the gym if you are sick
- Use the restroom before you arrive
- After arriving at your assigned court, do not leave your court to retrieve a ball or for any other reason than to exit the facility
- Any member who has come in close contact with an individual who has tested positive for COVID-19 will be directed to report the exposure to their coach and the Tournament Director prior to arriving at the facility.

Lyndsey Oates Volleyball Camps, LLC (hereafter referred to as "UNC Volleyball") has put in place numerous preventative measures and enhanced cleaning protocols to reduce the likelihood of spreading COVID-19 in the gym environment; however, UNC Volleyball cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending sponsored activities at UNC could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily agree to the participation terms described above and assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending UNC Volleyball Camps and that such exposure or infection may result in personal injury, illness, permanent disability, and death.

I understand that the risk of becoming exposed to or infected by COVID-19 at UNC Volleyball Camps may result from the actions, omissions, or negligence of myself and others, including, but not limited to, UNC Volleyball employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at UNC Volleyball Camps or participation in UNC Volleyball programming ("Claims").

On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless UNC Volleyball Camps, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto.

I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of UNC Volleyball, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any UNC Volleyball activity.

Participant's Name(s): \_\_\_\_\_ Team(s): \_\_\_\_\_

Participant's Signature (if 18 or older): \_\_\_\_\_

Parent/Legal Guardian Name(s) (for participants under 18): \_\_\_\_\_

Signature(s) of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_