

2017 Little Lions Camp Departure/Release Form

You agree and acknowledge that neither The Trustees of Columbia University in the City of New York (the "University"), nor any of its present or former trustees, officers and employees ("agents or employees"), shall have responsibility for any loss, injury, or damage including, but not limited to, any personal injury, death, or property damage, and you hereby expressly waive all rights, claims, causes of action, and the like of any nature whatsoever which you or your heirs or legal representatives may have against the University or any of its agents or employees in connection with your participation in said activity. By signing this Liability Waiver, you acknowledge that you understand that your child's participation in this activity is completely voluntary and at your own risk. You agree and promise to indemnify, defend, and hold harmless the University, including all of its agents and employees, as a result of any injuries, damage, illness, or death in connection with your child's participation in Little Lions Camp. You further hereby give permission to the coaches, training staff, or other medical professionals to provide medical care as deemed necessary to my child in case of injury or illness.

Name of Camper (please print): _____

- My Child HAS Permission to Leave Cubs Camp Unattended.
- My Child DOES NOT Have Permission to Leave Cubs Camp Unattended.

He/she may leave only with one of the following guardians listed below. Photo identification may be requested.

1. _____
Name Phone

2. _____
Name Phone

3. _____
Name Phone

4. _____
Name Phone

Signature of Parent/Legal Guardian _____ Date _____