

**LOYOLA UNIVERSITY NEW ORLEANS  
CAMP/PROGRAM - GENERAL INFORMATION & RELEASE**

**GENERAL INFORMATION**

Camp/Program Name \_\_\_\_\_

Date(s) \_\_\_\_\_ Location \_\_\_\_\_

Participant Name \_\_\_\_\_

Phonetical Pronunciation of Participant's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ T-Shirt Size \_\_\_\_\_ Gender: \_\_\_\_\_

Parent/Legal Guardian Name \_\_\_\_\_

Relationship to Participant \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Emergency Contact #1:**

Name \_\_\_\_\_ Relation \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

**Emergency Contact #2:**

Name \_\_\_\_\_ Relation \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

**LOYOLA UNIVERSITY NEW ORLEANS  
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Camp/Program Name \_\_\_\_\_ Participant Name \_\_\_\_\_

**Release, Waiver, Discharge and Covenant Not to Sue**

**READ THIS DOCUMENT COMPLETELY BEFORE SIGNING. ITS EFFECT IS TO RELEASE LOYOLA UNIVERSITY NEW ORLEANS FROM ANY LIABILITY RESULTING FROM PARTICIPATION IN THE PROGRAM NAMED ABOVE, AND TO WAIVE ALL CLAIMS AGAINST THE UNIVERSITY FOR DAMAGES AND/OR LOSSES WHICH MAY ARISE FROM SUCH PARTICIPATION AND COVENANT NOT TO SUE.**

This is a legally binding Release executed on behalf of \_\_\_\_\_ (Participant Name, "Participant"), by \_\_\_\_\_ (Participant's Parent/Guardian()) to LOYOLA UNIVERSITY NEW ORLEANS, 6363 St. Charles Avenue, Campus Box 9, New Orleans, LA 70118 ("University").

1.0 I, the undersigned request that \_\_\_\_\_ (Participant) be granted permission to participate in \_\_\_\_\_ (Program Name, "Program"), located on the University's campus.

2.0 In consideration of the Participant being permitted to participate in the Program, I do release, waive, forever discharge, and covenant not to sue the University, its governing board, 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, from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature which Participant may have or which may hereafter accrue to Participant, arising out of or related to any loss, damage, or injury, including but not limited to suffering and death, that may be sustained by Participant or by any property, whether caused by the negligence or carelessness of the University, or otherwise, while Participant is in, on, upon, or in transit to or from the premises where the Program, or any adjunct to the Program, occurs or is being conducted.

3.0 I have signed this "Release, Waiver, Discharge and Covenant Not to Sue" in full recognition and appreciation of the dangers, hazards, and risks of such participation, which dangers include but are not limited to all activities associated with and inclusive of the Program indicated above, and which could include serious or even mortal injuries and property damage. I further attest that we (Participant's Parent/Guardian and Participant) have fully discussed the aforementioned risks and hazards, and Participant's Parent/Guardian agree that Participant has individually assumed the risks involved with this Program as witnessed below. I understand that we are solely responsible for any costs arising out of any bodily injury or property damage sustained through participation in normal or unusual acts associated with the above-named Program.

4.0 I authorize Loyola University to copyright and publish all photographs, video footage, or audio recordings in print or electronic format in which Participant may appear or speak that are taken by or for the University. I agree that the University may use, edit or reproduce such photographs, video footage, or audio recordings or share them with others for any purpose related to the promotion of the University. I release and discharge all claims against the University and any others acting on behalf of the university with respect to the copyright, publication or use of such photographs, video footage, audio recordings, or text including any claim for compensation related to their use.

5.0 I understand and agree that University has limited medical personnel available on the campus. I understand and agree that University is granted permission to authorize emergency medical treatment, if necessary, and that such action by

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University shall be subject to the terms of this Release. I understand and agree that University assumes no responsibility for any injury or damage that might arise out of or in connection with such authorized emergency medical treatment.

6.0 It is my express intent that this release and hold harmless agreement shall bind the members of Participant's family, if Participant is alive, and Participant's family, estate, heirs, administrators, personal representatives, or assigns, if Participant is deceased, and shall be deemed as a "Release, Waiver, Discharge and Covenant Not to Sue" the University. Participant's Parent/Guardian further agrees to save and hold harmless, indemnify, and defend the University from any claim by Participant or Participant's family, arising out of Participant's participation in the Program.

7.0 In signing this Release, Participant's Parent/Guardian acknowledges and represents that I have fully informed myself of the content of this release and hold harmless agreement by reading it before we (Participant's Parent/Guardian and Participant) sign it, and that we have reviewed it and Participant understands what it means, and that we sign this document as our free act and deed. No oral representations, statements, or inducements, apart from the foregoing written statement, have been made. I further state that there are no health-related reasons or problems which preclude or restrict the Participant's participation in this Activity, and that Participant has adequate health insurance necessary to provide for and pay any medical costs that may be attendant as a result of injury to the Participant.

8.0 I further agree that this Release shall be construed in accordance with the laws of the State of Louisiana. If any term or provision of this Release shall be held illegal, unenforceable, or in conflict with any law governing this Release the validity of the remaining portions shall not be affected thereby.

I, Participant's Parent/Guardian further state that I am Participant's Parent/Guardian, and am fully competent to sign this Agreement; and that I execute this release for full, adequate and complete consideration fully intending for myself, for the Participant, and for Participant's family, estate, heirs, administrators, personal representatives, or assigns to be bound by the same. 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, Waiver, Discharge and Covenant Not to Sue.

IN WITNESS WHEREOF, we have executed this release this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**This is a release of legal rights. Read before signing.**

**Participant Name** \_\_\_\_\_ **Parent/Guardian Name** \_\_\_\_\_

**Participant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_