

**Pasco-Hernando State College Athletic Program Registration**

Name: \_\_\_\_\_ Age: \_\_\_\_ Grade \_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone # \_\_\_\_\_ Emergency Contact Phone # \_\_\_\_\_

School: \_\_\_\_\_ Specific Sport Event \_\_\_\_\_

**Release, Waiver and Consent for Enrollment in PHSC Athletic Events**

In consideration of being allowed to participate in any way in the Pasco-Hernando State College

Showcase, related events and activities, the undersigned acknowledge, appreciates, and agrees that: 1.

For myself and on behalf of my heirs, assigns, personal representatives and next of kin, I hereby release

and hold harmless Pasco-Hernando State College, The District Board of Trustees of Pasco-Hernando

State College, and any of its Trustees, officers, servants, agents or employees (collectively PHSC) and if

applicable, owners and lessors of premises used to conduct this camp (releasees) with respect to any

and all personal injury and bodily injury, disability, death, or loss or damage to person or property,

whether arising from the negligence of the releases or otherwise that may be sustained by my

child/legal ward, while in, on or upon the premises where the camp activities are being conducted, and,

2. I, as parent/guardian with legal responsibility for this camp participant, do consent and agree to

releasees as listed above all the releases for myself, my heirs, assigns, and next of kin, and agree to

indemnify the releasees from any and all liabilities incidental to my minor child's involvement or

participation in these programs. Consenter agrees to assume all risks and liabilities associated with

Camper's participation in the Camp and to hold PHSC harmless from any and all claims, causes of action,

losses or damages arising from or as a result of Camper's participation in the Camp, except due to the

negligence or wrongful act or omission of PHSC. However, PHSC's liability hereunder is subject to the

extent and limitations of Section 768.28, Florida Statutes, and nothing herein shall be construed as a

waiver of PHSC's sovereign immunity beyond that provided in Section 768.28, Florida Statutes. 3. I

further agree to indemnify and hold harmless the releasees from any loss, liability, damage or costs,

including court costs and attorney's fees, that they may incur due to my child's participation in camp activities whether caused by negligence of releasees, or otherwise. PHSC Showcases Release and Waiver

4. I/we, the undersigned, hereby certify that I/we, am/are the parent or legal guardian of the camper named below. I/we hereby give permission for the staff of this camp to administer during the period of the camp, appropriate medical attention to my child provided to the Showcase which are not paid by the camp's excess policy after all other available personal insurance has paid or declined payment. 5. I hereby consent for emergency medical treatment of camper named below, in the event that I cannot be reached. 6. PHSC may take photographs and/or videos of camper while participating in our program. PHSC has the permission to use this media in any manner at all, in whole or part, either by themselves or in conjunction with other promotional and advertising agencies, and for other trade purposes. I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it and sign it freely and voluntarily without any coercion or improper inducement. I have no knowledge of any physical condition that would prohibit my child from participating in the Pasco-Hernando State College Showcase

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

\_\_\_\_\_  
Parent/Guardian's Signature (under 18)

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Insurance Company

\_\_\_\_\_  
Carrier Policy #

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Witness Name and Title with PHSC