



Hosted by Melissa Inouye
Head Coach of Fordham University Softball

Waiver and Release Statement

THE UNDERSIGNED, BEING A PARENT OR LEGAL GUARDIAN OF THE CHILD REQUESTING ADMITTANCE TO THE **MELISSA INOUE SOFTBALL CAMPS LLC** AND **FORDHAM UNIVERSITY**, DOES HEREBY AFFIRM THAT THE APPLICANT IS IN GOOD HEALTH AND SUFFERS FROM NO SERIOUS ILLNESS, DISABILITY OR CONDITION THAT REQUIRES THE TAKING OF MEDICATION ON A REGULAR BASIS UNLESS THAT CONDITION IS DISCLOSED AND APPROVED. FURTHERMORE, THE UNDERSIGNED HAS NO KNOWLEDGE OF ANY REASON WHY THE APPLICANT CANNOT OR SHOULD NOT, PARTICIPATE IN VIGOROUS PHYSICAL ACTIVITY.

I UNDERSTAND THAT, AS A CONDITION OF ADMITTANCE TO THE **MELISSA INOUE SOFTBALL CAMPS LLC** AND **FORDHAM UNIVERSITY**, THE UNDERSIGNED, ON BEHALF OF ALL PARENTS AND GUARDIANS, AND ON BEHALF OF THE APPLICANT, HEREBY AGREE TO RELEASE, INDEMNIFY AND HOLD HARMLESS FORDHAM UNIVERSITY, ITS AGENTS, TRUSTEES, EMPLOYEES, REPRESENTATIVES, OR ASSIGNS, INCLUDING FORDHAM ATHLETIC DEPARTMENT, THE COACHING AND TRAINING STAFF AND CAMP EMPLOYEES, MELISSA INOUE SOFTBALL CAMPS LLC, FROM ALL CLAIMS AND ANY LIABILITY RESULTING FROM ANY ILLNESS OR INJURY SUSTAINED BY MY CHILD WHILE TRAVELING AND PARTICIPATING IN THE CAMP. WE/I 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 ILLNESS OR INJURY.

Participant's Name: _____

Parent/Guardian

Signature: _____

Date: _____