

**Liability Release and Indemnity Agreement**

The following waiver and release is required by the IPFW Baseball Camp on the IPFW Campus for all campers: In consideration of my application being accepted, intending to be legally bound do, hereby, for myself, my heirs, executors, and administrators, waive, release, and forever discharge any and all claims for damages, which I may or which may hereafter occur to me, against the camp or its, or their, respective officers, agents, representatives, successors and/or assignees, for any or all damages that may be sustained or suffered by me in connection with my association with, or participation on, the campus of IPFW. I, the parent or guardian, do hereby agree to the above waiver and release.

**Parent/Guardian Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Insurance**

All participants should be covered by a personal medical insurance policy. Each camper is asked to supply the company name and policy number.

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

**Policy #** \_\_\_\_\_