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2020 Vermont Football Camps Waiver Form

Parental Release Form & Waiver of Liability

My Son/Daughter

(Name of Athlete)

Has had a physical exam with in the last two years and is physically fit to participate in the activity.

[Check below the name of camps or clinics or combines your child is attending](#)

Southern Vermont Football Camp: July 13-17, 2020

Southern VT QB/Rec: Sunday July 12, 2020 Southern VT Combine: Thursday July 16, 2020

Northern Vermont Football Camp: July 20-24, 2020

Northern VT QB/Rec: Sunday July 19, 2020 Northern VT Combine: Thursday July 23, 2020

Parental Release Form & Waiver of Liability Information:

My son/daughter, _____, has had a physical exam within the last two years and is physically fit to participate. I authorize the event athletic trainer to act on my behalf according to his/her best judgement (including immediate medical attention and/or transportation to an area medical facility) in the event of any emergency and I cannot be contacted. I also authorize the hospital medical personnel to act on my behalf in the event of any emergency requiring transport to a medical facility and I cannot be contacted. Furthermore, I understand that participation in the sport of football carries inherent risk of physical injury. I furthermore agree to absolve Vermont All-Star Football Camps, independent contractors, the high school or college upon whose property the events are held of any liability resulting from injury, catastrophic, death or other distress incurred while participation in the chosen event.

Signature of Parent or Guardian