## THIS FORM MUST <u>ACCOMPANY CAMPER</u> AT REGISTRATION **MERCER UNIVERSITY FACILITIES USAGE FORM**

Camper Name	Birth Date
Address	Gender
City/State/Zip	Age
Home Phone	
Cell Phone	
Email	☐ Cheerleading ☐ Tennis ☐ Dance ☐ Other ☐ Golf
Medical Information:	
Emergency Contact	Phone
Relationship to Camper	Insurance Policy No
Insurance Carrier	Insurance Group No
I hereby waive, release, absolve and agree to hold harmless Mercer University, its administrators, employees, coaches, students and staff as well as the organizers, supervisors, volunteers, sponsors, participants and persons transporting me to and from activities from any claim arising out of any injury to myself, whether the result of negligence or for any other cause.  2. I (We) the parent(s)/guardian(s) of the above-named Camper hereby give my (our) approval for Camper to participate in activities utilizing Mercer University facilities and Mercer University athletic facilities. I (We) have read paragraph 1. above and agree to hold harmless Mercer University, its administrators, employees, coaches, students and staff, as well as the organizers, supervisors, volunteers, sponsors, participants and persons transporting my (our) Camper to and from activities, harmless from any claim arising out of any injury to my (our) Camper, whether the result of negligence or for any other cause.  3. Accident/medical insurance coverage is <u>not</u> provided by Mercer University. If injured while at Mercer University facilities, I (we) understand that I (we) are responsible for medical expenses and/or insurance coverage.	
	insurance is <u><b>not</b></u> provided by Mercer University. I <u><b>not</b></u> responsible for property damage resulting from the tic facilities.
Signature of Camper (if 18 or older)	Date
Signature of Parent or Guardian	Date