**Participant Agreement**

In consideration of my acceptance to engage in the KMC Empower Camps at Dartmouth College, I do hereby release KMC Empower Camps, LLC, and Dartmouth College, its officers, directors, employees, and agents (“the College”) from responsibility for:

1. Any and all injuries caused by the negligence, recklessness, or intentional acts of myself and/or any third parties. My waiver of personal injury does not include injury caused by the negligence, recklessness, or intentional acts of the College.

2. Any and all property damage that may occur while I participate in the KMC Empower Camps property damage waiver includes all property damage, including that caused by the negligence, recklessness, or intentional acts of myself, third parties, and/or the College.

I hereby acknowledge that my (or my child’s) participation is strictly voluntary, and that by signing this document, KMC Empower Camps, LLC and I agree to stop and request assistance if I (or my child) experience any symptoms such as, but not limited to, dizziness, excessive fatigue, dehydration, shortness of breath, pain, or any other conditions which would make it difficult or unsafe to continue. I (or my child) further agree to obey all federal, state, and local laws, use proper safety equipment, and follow the instructions of the KMC Empower Camps sponsors and representatives while participating in this event. I attest that, to my knowledge, my (or my child’s) equipment are in proper working order.

**Assumption of Risk:** I fully appreciate the nature and extent of the risks involved in Volleyball. Participation in an athletic event carries with it certain inherent risks that cannot be eliminated regardless of the care taken. These risks include, but are not limited to:

• Collisions with another athlete or spectator

• The potential for serious bodily injury, sickness and disease, permanent disability, paralysis

• and loss of life

• Cuts, scrapes, bruises, concussions, loss of consciousness, and musculoskeletal injuries

• Falling and tripping

• Failure of other athletes or of spectators to observe proper safety procedures or heed safety instructions

• Injuries and illness resulting from the effects of weather, including high heat or cold temperatures, high winds, sun exposure, humidity, and precipitation

• The effects of the ball moving very fast and it may hit athletes or spectators if and when they are not paying attention

**Representations Concerning Health:** With full knowledge of the risks inherent to Volleyball, I represent that I (or my child) am in good health and do not have any condition which will interfere with my (or my child’s) ability to participate in the KMC Empower Camps or endanger my (or my child’s) health in connection with the KMC Empower Camps. I acknowledge valid and current insurance to cover any injury or damage I (or my child) may cause or suffer while participating in the KMC Empower Camps or otherwise agree to personally bear the costs of such injury or damage. I authorize, but do not obligate, a KMC Empower Camps representative to seek emergency medical treatment for me (or my child) in the event of an accident or illness that occurs during my (or my child’s) participation in the KMC Empower Camps, even if I (or my child) am unconscious or otherwise cannot consent. I attest that if I (or my child) have recently suffered an illness, injury, or impairment, or have any concerns about my (or my child’s) ability to participate in the KMC Empower Camps, I should have or did consult a physician prior to my (or my child’s) participation. I further take full responsibility for consulting a physician if I experience any doubt as to my (or my child’s) ability to successfully and safely complete any KMC Empower Camps activity once it has begun.

**Acknowledgement of Understanding:** I have read this agreement and fully understand its terms**. I acknowledge that I am signing the agreement freely and voluntarily and intend it by my signature to be a release of liability as stated above and as it relates to the KMC Empower Camps, LLC to the greatest extent allowed by law.** I further state that I am of lawful age and legally competent to sign this affirmation and release (or that I am lawfully signing it on behalf of a minor child), and that I have signed this document of my own free will.

Signed on this \_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2024.

SIGNED: Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Legal Guardian (if Participant is under the age of 18)

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