## NFL PLAY 60 CHARACTER CAMP WAIVER OF LIABILITY AND RELEASE

I am the parent or legal guardian of the child whose name and birth date appear below (the "Child"). In return for allowing the Child to participate in the NFL PLAY 60 Character Camp (the "Event") at Jaguars Indoor Facility at 1 Daily's Place, Jacksonville, FL 32202 on July 13, 2018, on my behalf and that of the Child, I release, hold harmless and agree not to sue the National Football League, its thirtytwo (32) member professional football teams, NFL Properties LLC, NFL Ventures, L.P. and its direct and indirect subsidiaries (collectively, "NFL"); USA Football, Inc.; the Muñoz Agency, Under Armour, Inc., Proctor and Gamble; and any of their respective elected and appointed officials, officers, directors, employees and volunteers, all boards, commissions and authorities (including their respective board members, employees and volunteers), subcontractors, sponsors, licensees, agents, affiliates, subsidiaries, shareholders (collectively, the "Releasees") from all present and future claims that may be made by me, the Child, the Child's family, estate heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of the Child's participation in the Event wherever, whenever or however the same may occur, including but not limited to, transportation to and from the Event and medical treatment. I understand and agree that those listed above are not responsible for any injury or property damage arising out of the Event, even if caused by their ordinary negligence. I understand that participation in the Event involves certain risks, including but not limited to, serious injury and death. I agree that the Child and I are voluntarily participating in the Event and have knowledge of the danger(s) involved and agree on the Child's behalf to accept all risks of participation. I consent to administration to the Child of first aid and other medical treatment in the event of injury or illness. I agree that without any further consideration from the Releasees, to grant the Releasees the unlimited right throughout the world to capture and/or use my or the Child's name, nickname, image, likeness, voice, photograph, video recordings, signature facsimile, and biographical information in any matter and for any purpose in any media now known or hereafter existing (including but not limited to a co-branded commercial or PSA with any NFL sponsor or licensee (e.g., Proctor & Gamble)) in perpetuity. Specifically, I acknowledge that the NFL and its sponsors and licensees shall have the unlimited right throughout the world to copyright, telecast, use, reuse, publish, republish, broadcast and otherwise distribute all or any portion of any recordings and interviews in which I or the Child may appear in connection with the Event (collectively, the "Promotions") on any and all radio, network, cable and television programs and in any and all print materials and in any other format or media (including electronic media) now or hereafter existing in perpetuity without compensation. In addition, I acknowledge that such Promotions may contain references to the NFL and its sponsors and licensees or other third party sponsors. I understand that this document is intended to be as broad and as inclusive as permitted by the laws of the state in which the Event is taking place and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect. I further agree that any legal proceedings related to this waiver will take place in New York, New York.

## For California Residents Only

I, on my behalf and that of the Child, hereby expressly waive all rights under Section 1542 of the Civil Code of the State of California, and under any and all similar laws of any jurisdiction. I am aware that said Section 1542 of the Civil Code provides as follows:

## A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS FAVOR AT THE TIME OF EXECUTING THE RELEASE, WHICH IF KNOWN BY HIM MUST HAVE MATERIALLY AFFECTED HIS SETTLEMENT WITH THE DEBTOR.

I have read this Agreement and have discussed its contents with the Child.		Date:	
Parent/Guardian Signatur	e:		
Print Parent/Guardian Na	me:		
Address:			
City/State/Zip:			
Phone:	E-Mail Address		
Child's Name:		Child's Birthdate:	
Child's School:		Grade Entering:	
Organization: (How did y	you hear about the camp)		
Has the camper participat	ed in organized football? Yes No		

Gender: M F Ethn	icity: American Indian	Asian	Black or African American	White	Hispanic
Emergency Contact Perso	on:				
Name:					
Address:					
City/State/Zip:			C 11		
Phone: Home: Work:			Cell:		
I hereby give consent for	the following medical care	providers	and local hospital to be called:		
Doctor:			Phone:		
Dentist:			Phone:		
Local Hospital:					
Insurance Company (not required):			ID Number:		

Please list ALL medications and dosage instructions (including over the counter) that your child will be taking at the camp. (Please bring medications to check-in when you arrive at the camp):

Description of any limitation or restriction for physical activity:

Please list any allergies that we should be aware of for your child:

Please explain any other information that might be helpful for us to know about your child:

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by above named doctors, or, in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and (2) the transfer of the child to any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

By signing below, you are allowing a member of the camp staff to dispense medication to your child, if necessary. If you have any questions or concerns, please contact Ryan Betscher at (513) 744-1820. Thank you for your cooperation. Please Note:

- Medicine must be in the original container with the prescription information on it and given to the athletic trainer upon arrival
- The camp is located within ten minutes of a local hospital

Signature of Parent/Guardian: \_

Date:

## EMAIL COMPLETED REGISTRATION FORM to Registration@munozagency.com SUBJECT: JAGUARS CAMP

Inclement Weather Policy: In the event of rain, all campers will be moved inside at the facility. Camp will continue as scheduled from 6:00 - 9:00. If weather improves, kids will be taken back outside for the remainder of camp. No make-up days will be provided due to inclement weather.

I'd like to receive updates and promotional offers from the NFL, the Jacksonville Jaguars, and their partners, including the Releasees, and consent to being added to their respective email databases.

\*Facsimile signatures for all purposes of this Agreement shall be considered effective and binding on all parties hereto as actual original signatures.