

PLEASE READ THIS CAREFULLY

It affects any rights you may have if you are injured or otherwise suffer damages while participating in the ISU High School Golf Coaches Clinic sponsored by Cyclone Golf Camps LLC.

I, _____ (participant, please print), hereby release, waive, discharge and covenant not to sue Cyclone Golf Camps, Iowa State University Athletics Department, the State of Iowa, the Board of Regents of the State of Iowa, Iowa State University, and any of the officers, servants, agents, and employees of the above mentioned entities (hereinafter referred to as RELEASEES) for any liability, claim and/or cause of action arising out of or related to any loss, damage or injury, including death, that occurs as a result of the undersigned organization's or agency's participation in the above described activities.

I agree to indemnify and hold harmless the RELEASEES whether injury is caused by my negligence, the negligence of the RELEASEES, or the negligence of the third party. I further agree that this Release and Waiver of Liability shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE, and COVENANT NOT TO SUE the above names RELEASEES. I hereby further agree that this Release and Waiver of Liability shall be construed in accordance with the laws of the State of Iowa.

By signing this Release and Waiver of Liability, I state that I have read and understand the conditions set forth in this Release and that I agree to all conditions set forth herein, and that I sign this voluntarily.

Name of Organization or Agency (High School)

Signature

Date