

**ACKNOWLEDGMENT, WAIVER, RELEASE AND INDEMNIFICATION
AGREEMENT**

The undersigned, parent/guardian of a minor child who intends to attend the Norm Roberts Basketball Camp at Carnesecca Arena and Taffner Field House located at St. John's University, New York (the "University"), hereby acknowledges that the Norm Roberts Basketball Camp is not sponsored by the University, and is being provided solely by Norm Roberts on the University's premises. I hereby acknowledge and accept that there are certain risks arising from or in connection with the Norm Roberts Basketball Camp, including but not limited to bodily injury. I am fully aware of the risks and hazards connected with the activity, and voluntarily assume full responsibility for any risks of loss, property damage or personal injury that may be sustained by my son as a result of attending the Norm Roberts Basketball Camp, whether caused by the negligence of the University or otherwise.

I hereby represent and warrant that my child is in good health and that he has no health condition, illness or communicable disease that may make my use of Carnesecca Arena or Taffner Field House injurious to him or any other user of the basketball facilities previously mentioned. If my child should develop any such condition, illness or disease during the weeks of Norm Roberts Basketball Camp, I promise to have my child cease attendance at the Norm Roberts Basketball Camp until we have received an appropriate medical release from his doctor authorizing him to continue the Norm Roberts Basketball Camp.

I hereby release and forever discharge the University and its trustees, officers, servants, agents and employees from any and all liability for any damages, losses or injuries which may be sustained or suffered by myself arising out of, during or in connection with the Norm Roberts Basketball Camp.

I hereby hold harmless the University and its trustees, officers, servants agents and employees from any and all liability, loss or damage they or any of them incur or sustain as a result of any claims, demands, judgments, costs or expenses, including attorneys' fees, which may result from, arise out of, or relate to the Norm Roberts Basketball Camp.

I further represent and warrant that my child's participation in the Norm Roberts Basketball Camp is covered by a policy of comprehensive health and accident insurance that provides coverage for injuries that my son may sustain as part of his participation in the Norm Roberts Basketball Camp.

I, _____,

- (A) am the parent or legal guardian of the above participant,
- (B) have read the foregoing Acknowledgment, Waiver, Release and Indemnification Agreement (including such parts as may subject me to personal financial responsibility),
- (C) am and will be legally responsible for the obligations and acts of the participant as described in this Acknowledgment, Waiver, Release and Indemnification Agreement, and
- (D) agree, for myself and for the participant, to be bound by its terms.

Signature of Parent/Guardian

Date