

Release Form

CAMPER NAME _____

This information is for the upcoming SDSU Baseball Camp. Please fill out the information below and mail it back. If you have any questions or concerns you may call 605-688-5027 and ask for Jake Angier or Ryan Overland. Thank you and we look forward to seeing you at camp.

Insurance Provider-_____

Insurance Number-_____

Release Form In consideration of the acceptance of this application, I, intending to be legally bound hereby for myself, my heirs, executors, administrators, waive and release any and all rights and claims for damages I may have against South Dakota State University, or its representatives and/or assignees for any and all damages which may be sustained and suffered out of my traveling to, participation in, and returning from camp.

Participant's Signature

Parent's or Guardian's Signature