



## Health and Authorization Form The Sports Factory Camps

Please complete this form and mail or fax it to the address below prior to camp start date.

The Sports Factory  
175 Beaverbrook Road  
Lincoln Park, NJ 07035

Fax: 973 696-9499

Name of Camper: \_\_\_\_\_

Please specify chronic medical problems:  
(Diabetes,asthmas, epilepsy, food and drug allergies,etc.):

\_\_\_\_\_  
\_\_\_\_\_

List any activity restrictions of your child:  
\_\_\_\_\_  
\_\_\_\_\_

Please give date of following immunizations:  
Diphtheria\_\_\_\_ Poliomylitis\_\_\_\_ Measles\_\_\_\_ Mumps\_\_\_\_ Rubella\_\_\_\_

List any current medications your child is taking:  
\_\_\_\_\_  
\_\_\_\_\_

Doctors Name: \_\_\_\_\_

<b>The Sports Factory</b>
<b>2015 Spring Break Camps</b>
<input type="checkbox"/> March 30 - April 3
<input type="checkbox"/> April 6 - 10
<b>2015 Indoor Summer Camps</b>
<input type="checkbox"/> June 22 – 26
<input type="checkbox"/> June 29 - July 3
<input type="checkbox"/> July 6 – 10
<input type="checkbox"/> July 13 – 17
<input type="checkbox"/> July 20 – July 24
<input type="checkbox"/> July 27 – July 31
<input type="checkbox"/> August 3 – August 7
<input type="checkbox"/> August 10 – August 14
<input type="checkbox"/> August 17 – August 21
<input type="checkbox"/> August 24 – August 28

Please read and sign Medical Authorization and Waiver on REVERSE side.



**J&S Enterprises, LLC / The Sports Factory / TSF Academy**

(The Club)

**WAIVER & RELEASE FORM**

Because physical exercise can be strenuous and subject to risk of serious injury, the club urges you to obtain a physical examination from a doctor before using any exercise equipment or participating in any exercise activity including but not limited to soccer, soccer drills, conditioning, speed and agility work. You (each member, guest, and all participating family members including minors in which you are the parent/guardian) agree that if you engage in any physical exercise or activity, or use any club amenity on the premises or off premises including any sponsored club event, you do so **entirely at your own risk**. Any recommendation for changes in diet including the use of food supplements, weight reduction and or body building enhancement products are entirely your responsibility and you should consult a physician prior to undergoing any dietary or food supplement changes. You agree that you are voluntarily participating in these activities and use of these facilities and premises **and assume all risks** of injury, illness, or death. We are also not responsible for any loss of your personal property.

This waiver and release of liability includes, without limitation, all injuries which may occur as a result of, (a) your use of all amenities and equipment in the facility and your participation in any activity, class, program, personal training or instruction, (b) the sudden and unforeseen malfunctioning of any equipment, (c) our instruction, training, supervision, or dietary recommendations, and (d) your slipping, tripping, bumping, and/or falling while in the club, or on the club premises, including adjacent sidewalks and parking areas.

You acknowledge that you have carefully read this waiver and release and fully understand that it is a **release of liability**. You expressly agree to release and discharge the club(J&S Enterprises, LLC, The Sports Factory, TSF Academy), and all affiliates, directors, owners, employees, agents, representatives, successors, or assigns, from any and all claims or causes of action and you agree to voluntarily give up or waive any right that you may otherwise have to bring a legal action against the club for personal injury or property damage.

To the extent that statute or case law does not prohibit releases for negligence, this release is also for negligence on the part of the Club, its agents, and employees.

If any portion of this release from liability shall be deemed by a Court of competent jurisdiction to be invalid, then the remainder of this release from liability shall remain in full force and effect and the offending provision or provisions severed here from.

By signing this release, I acknowledge that I understand its content and that this release cannot be modified orally.

**Signed: /s/**

**Printed Name:**

**Names of family members (if applicable):**