

# BRENDA SCHULTZ TENNIS CAMP



**2446 DEER RUN ROAD  
FERRUM, VA 24088**

## ADULT RELEASE WAIVER

Please list all allergies, preexisting medical conditions, medications, or any activities that you do NOT want to participate in.

Allergies (including food)

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Preexisting Medical Conditions

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Medications currently being taken

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Any other needs or conditions not previously mentioned

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Name of Health Insurance Company: \_\_\_\_\_.

Emergency contact: \_\_\_\_\_.

Phone #: \_\_\_\_\_.

In case of emergency, I grant permission to be given medical treatment by a physician or hospital. I agree to hold Brenda Schultz Sports Camp LLC, Blue Ridge River LLC, all staff members and Brenda Schultz personally harmless from any liability or personal expense arising out of camp attendance.

I also give permission for the use of any photos or videos involving me taken at the camp for publicity purposes.

I have read and agree to abide by the above.

Signature: \_\_\_\_\_.

Date: \_\_\_\_\_.