

RELEASE OF LIABILITY AND INDEMNIFICATION

This Release of Liability and Indemnification ("Release") is made by the undersigned, an individual over the age of eighteen (18) years, effective as of the date set forth below.

I hereby acknowledge that I have voluntarily applied on behalf of myself (if 18 years or older) or on behalf of the minor identified herein _____ (*name of athlete participant*) (collectively, "Participant") to attend and participate in the Bedrock Youth Academy, Inc. ("Bedrock") RAS Football Camp that may include, but may not be limited to, combine testing and related activities, 7 on 7 competitions and related skills testing and competitive activities (collectively, "Activities") that will take place on the campus of Trine University on June 2, 2012.

In consideration of Participant being permitted to participate in the Activities, I, for myself and on behalf of Participant, understand, acknowledge and agree as follows:

1. I understand and agree that participation in a football camp, including, but not limited to, combine testing and related activities, 7 on 7 competitions and related skills testing and competitive activities includes an inherent risk of injury or even death, even if the greatest care is exercised. I understand and accept that such risks simply cannot be eliminated without jeopardizing the essential qualities of the Activities.

2. I understand and agree to accept and assume any and all of the risks existing in the Activities. Participant's participation in the Activities is purely voluntary, and I elect to have Participant participate in spite of the risks of participation in the Activities, which include injury to Participant up to and including death and damage or destruction to personal property. I understand that I am solely responsible to exercise my own judgment in determining what Activities are suitable for participation by Participant.

3. I understand and acknowledge that Bedrock recommends that each Participant undergo a comprehensive physical examination prior to commencing participation in the Activities. I agree that Bedrock is not responsible for providing or conducting any physical examination prior to Participant's participation in the Activities. I represent and warrant to Bedrock that Participant is in good physical condition, able to participate in vigorous football development and training, competition and testing, including the Activities. I represent and warrant that Participant has no medical or physical condition which could interfere with Participant's safe and healthy participation in the Activities, and I hereby assume and agree to bear the cost and expense of any and all risks that may be created, directly or indirectly, by any such medical and/or physical condition, if any, whether known or unknown.

4. IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE ACTIVITIES, I, FOR MYSELF AND ON BEHALF OF MY SPOUSE AND ON BEHALF OF PARTICIPANT, OUR LEGAL REPRESENTATIVES, HEIRS, SUCCESSORS AND ASSIGNS, HEREBY RELEASE, WAIVE, DISCHARGE AND AGREE TO INDEMNIFY AND HOLD HARMLESS ANTHONY SPENCER, INDIVIDUALLY, FORT WAYNE NEXT LEVEL, INC., BEDROCK, ATHLETES WITH PURPOSE, LLC, TRINE UNIVERSITY AND EACH ENTITY'S RESPECTIVE MEMBERS, MANAGERS, DIRECTORS, OFFICERS, EMPLOYEES, AGENTS AND EACH OF THEM (COLLECTIVELY, "RELEASEES") FROM AND AGAINST ANY AND ALL LIABILITY TO MYSELF, MY SPOUSE, PARTICIPANT, OUR LEGAL REPRESENTATIVES, HEIRS, SUCCESSORS AND ASSIGNS, ARISING OUT OF OR IN ANY WAY RELATED TO ANY AND ALL LOSS, DAMAGE OR LIABILITY AND ANY CLAIM, DEMAND, ACTION, OR RIGHT OF ACTION, DAMAGE, COST OR EXPENSE, INCLUDING ATTORNEY FEES, ARISING OUT OF OR IN ANY WAY RELATING TO ANY INJURY TO PARTICIPANT OR PARTICIPANT'S PROPERTY (OR ANY INJURY TO OTHERS OR THEIR PROPERTY CAUSED IN WHOLE OR IN PART BY PARTICIPANT), INCLUDING INJURY RESULTING IN DEATH (COLLECTIVELY, "LIABILITIES") WHETHER SUCH LIABILITIES ARE PRESENT OR FUTURE, KNOWN OR UNKNOWN, ANTICIPATED OR UNANTICIPATED AND WHETHER SUCH LIABILITIES ARE CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE IN ANY MANNER RELATED TO PARTICIPANT PARTICIPATING IN, OBSERVING, OR BEING PRESENT PRIOR TO, DURING OR AFTER THE CONDUCT OF THE ACTIVITIES.

5. I expressly agree that this Release shall be governed by the internal laws of the State of Indiana without regard to its conflict of laws and is intended to be as broad and inclusive as permitted by the laws of the State of Indiana, and that if any portion thereof is held invalid, it is agreed that the balance shall continue in full legal force and effect. This Release represents my entire and complete understanding concerning the subject matter of this Release and any prior oral understandings, discussions or agreements are hereby merged into this Release. This Release cannot be modified or amended without the prior and express written consent of Bedrock. In the event any Releasee is the prevailing party in any legal dispute between the parties concerning this Release and/or the subject matter of this Release, the Releasee shall be entitled to recover its costs, expenses and reasonable attorney fees from me. This Release shall survive the time frame for the Activities indefinitely. I have been given the opportunity to review this Release with legal counsel of my choice prior to my execution of this Release.

6. I HAVE CAREFULLY READ THIS RELEASE AND FULLY UNDERSTAND ITS CONTENTS AND AGREE TO ITS TERMS AND CONDITIONS. I AM AWARE THAT THIS RELEASE IS A RELEASE OF LIABILITY AND AN INDEMNIFICATION CONSTITUTING A CONTRACT BETWEEN MYSELF AND ON BEHALF OF PARTICIPANT WITH THE RELEASEES, AND I HAVE SIGNED IT OF MY OWN FREE WILL.

Dated this ___ day of _____, 2012.

"PARTICIPANT" (*If 18 years or older*)

Emergency Phone Number and Contact Person:

Name Printed:

I represent that I am the parent or legal guardian of the minor Participant who is identified in this Release. As such, I have the legal authority to execute this Release for myself and on behalf of such minor Participant. I, for myself and on behalf of the minor Participant, agree to be bound by the terms and conditions of this Release in accordance with its terms and conditions.

"PARTICIPANT" (*If Parent/Legal Guardian*)

Emergency Phone Number and Contact Person:

Name Printed:
