

University of Michigan
Comprehensive Cancer Center

2008 Women's Football Academy

Your signature is required for both Releases to participate in the **2008 Women's Football Academy** benefiting the University of Michigan Comprehensive Cancer Center.

PARTICIPATION RELEASE

I acknowledge that football is an inherently dangerous activity, which may result in personal injuries or death notwithstanding the efforts of the University of Michigan to minimize these risks. Having been advised of these risks, I have voluntarily decided to participate in the 2008 *U-M Women's Football Academy* and to engage in the game of football with other participants and employees, agents and/or students of the University. Having personally assumed these risks and in consideration of my being permitted to participate in the 2008 *U-M Women's Football Academy*, I release and hold harmless the University of Michigan, its agents, employees and any other persons involved with the 2008 *U-M Women's Football Academy* from all claims, demands, damages, actions, causes of action or suits for all injuries, losses and damages that I might sustain by participating in the 2008 *U-M Women's Football Academy*. In the event of an injury, the participant will be transported by ambulance to the University of Michigan Hospital Emergency Services. All expenses associated with transport and the care received in the Hospital will be the responsibility of the participant. I have read the terms of this Release, fully understand the Release and sign of my own free will.

(Signature)

(Date)

(Please Print Name)

PUBLICITY RELEASE

I give permission to the University of Michigan to release identifiable information about me and U-M owned photographs and videos of me ("item") to any radio, television, internet or print media and to use it for educational or promotional purposes. This information may be used by the University of Michigan Health System Public Relations office and the media indefinitely. I understand these items may be released to the public. Once released, this information is no longer protected and may be used by the public. I release the University of Michigan, its agents, employees and any other persons involved with taking or producing these items from any and all liability which may or could arise there from. I have read the terms of this Release, fully understand the Release and sign of my own free will.

(Signature)

(Date)

(Please Print Name)

Mail this form to:
UMCCC-Office of Development
Women's Football Academy
301 East Liberty, Suite 130
Ann Arbor, MI 48104

Fax this form to:
Women's Football Academy
Attn: Mary Jo Grand
(734) 998-6896

For more information call:
Mary Jo Grand
(734) 998-6895