

**MILWAUKEE BUCKS RELEASE AGREEMENT**

For good and valuable consideration, receipt of which is hereby acknowledged, on behalf of my minor child (the "Participant"), I, the Participant's parent or guardian, hereby hold harmless, release, waive, discharge and covenant not to sue or bring claim against Milwaukee Bucks, LLC, The National Basketball Academy, the National Basketball Association and its Member Teams, NBA Properties, Inc. and their respective parents, subsidiaries, affiliates, directors, officers, governors, employees and agents (the "Released Parties") from and against any and all claims, causes of action, or demands relating to or arising out of the Participant's participation with the 2019 Milwaukee Bucks National Basketball Academy Camp to take place at \_\_\_\_\_ on the following date(s): \_\_\_\_\_ (the "Activity"), and further agree to defend and indemnify the Released Parties for any claims, damages or causes of action relating to or arising out of the Activity.

I expressly assume all risk of injury (including, without limitation, permanent disability and death) relating to or arising out of the Activity, howsoever caused or arising and whether by all acts of negligence or otherwise, and accept personal responsibility for the damages following such injury, permanent disability or death; however, this agreement shall not waive liability for intentional or reckless acts committed by the Released Parties.

I RECOGNIZE THERE ARE INHERENT DANGERS ASSOCIATED WITH THE ACTIVITY TO WHICH THE PARTICIPANT MAY BE EXPOSED AND I HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, PARALYSIS, DEATH, OR PROPERTY DAMAGE ARISING OUT OF OR RELATED TO THE PARTICIPANT'S PARTICIPATION IN THE ACTIVITY.

I certify that the Participant is in good health and has no physical impairment, injury, or illness that will make his/her participation in the Activity dangerous to the Participant or others. If a medical emergency arises, then I grant permission to the Released Parties' designated personnel to administer first aid to and/or to obtain emergency medical treatment for the Participant.

I grant full permission to the Released Parties, by any means, whether now known or hereinafter developed, to exhibit, record, reproduce, broadcast, transmit, publish, sell, distribute, perform, use and re-use, and to license others to exhibit, record, reproduce, broadcast, transmit, publish, sell, distribute, perform, use and re-use, for any purpose, in any manner, without further notification, authorization or compensation to me or anyone on my behalf, the Participant's name and likeness, and any photographs, videotapes, motion pictures, recordings, or other record of the Activity (or any part or parts of the Activity) in any and all media, whether now known or hereafter developed, worldwide and in perpetuity, and I represent and warrant that no further permission is required for the Released Parties to use the Activity as provided herein.

I further represent and warrant that: (i) the Participant has the right to conduct the Activity and that the Activity will not reflect badly on the Released Parties, and (ii) I have full authority to execute this Milwaukee Bucks Release Agreement and do so with full knowledge of the facts and circumstances surrounding the Activity and the rights that I am granting herein.

I acknowledge that I have read and fully understand the foregoing.

*Since Participant is less than 18 years of age, this Release Agreement must be signed by Participant's parent(s) or legal guardian(s):*

Signature: \_\_\_\_\_  
Parent/Guardian Child/Participant

Print Name: \_\_\_\_\_

Dated: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_