

**EXHIBIT B**

**WAIVER AND RELEASE OF CLAIMS**

During the Summer of 2026, I choose to have my son or daughter participate in, and attend, a summer camp program that is operated by a third party and hosted at Wingate University (“the University”). While the camp operator and the University seek to make reasonable efforts to ensure that all members of the University community are safe and protected, neither the camp organizer nor the University can guarantee your son’s or daughter’s safety. Accordingly, the University expressly disclaims any representation or undertaking that your son’s or daughter’s attendance and participation is safe and the University further disclaims any and all liability or responsibility for any injury, damage, illness, infection, or condition that may result from or in connection with their attendance or participation. I also agree that the University and/or Camp may use my son’s or daughter’s likeness and right of publicity for the limited purpose of promoting the summer camp.

**ASSUMPTION OF RISK:** I have read and understood the above warning. I hereby choose to voluntarily accept the risks associated with attending the camp program in order to engage in the camp program and experience.

**WAIVER OF LAWSUIT/LIABILITY:** I hereby forever release and waive my right to bring suit against the University and its employees, officers, officials, trustees, agents, or other representatives in connection with any damages, death, illness, or injury to persons or property related to my son’s or daughter’s participation in the camp program. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

**CHOICE OF LAW:** I understand and agree that the law of the State of North Carolina will apply to this contract.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

Minor’s Name: \_\_\_\_\_

Please include your email address if you would like to receive information about Wingate University:

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