



Hardeeville Summer Camp Registration Form



Participants Name _____
First Name, Middle Name, Last Name

SEX (circle one): Male Female

ADDRESS _____ CITY _____ ZIP _____

PHONE _____ BIRTHDATE (MO/DA/YR) _____

AGE as of Sept 1, 2017 _____ GRADE (going into) _____ MEDICAL INFORMATION _____

Participant must be 5 years old and potty trained to participate

Each Camp is \$10.00 and goes from 9am-12pm

Please check camp(s) participant will be in:

_____ Soccer Camp 1 (June 12-13)

_____ Soccer Camp 2 (June 14-15)

_____ Nature (June 26-28)

_____ Arts and Crafts Camp (July 10-11)

_____ Culinary Camp (July 12-13)

_____ Journalism Camp (July 24- 26)

_____ Aqua Camp (August 7-8)

_____ NUMBER OF CAMPS X \$10.00 = _____ Total due

Paid by: () Check # _____ () Cash \$ _____ *Make check payable to City of Hardeeville*

Shirt Size: (Check One) YS _____ YM _____ YL _____ AS _____ AM _____ AL _____ AXL _____

Father Information (or legal guardian)

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE (h) _____ (cell) _____

EMAIL _____

Mother Information

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE (h) _____ (cell) _____

EMAIL _____

I. In consideration of the 2016/17 season, I, Parent or Guardian, of the above named candidate for a position in above mentioned Summer Camp program, hereby give approval for his or her participation in activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless the local league organization, the organizers, sponsors, supervisors, participants and persons from any claim arising out of an injury to the boy/girl. I also grant permission to managing personnel or other league representatives to authorize medical care from any licensed physician, hospital, or medical clinic should the boy/girl become ill, when neither parent is available to grant authorization for emergency treatment. I agree to return upon request equipment issued to the boy/girl in as good a condition as when received except for normal wear and tear. I will furnish a certified birth certificate of the above named candidate upon request by league officials.

By signing below, I acknowledge that I have read and agree to Items I. above.

X _____

PARENT/GUARDIAN SIGNATURE DATE