

THIS FORM MUST ACCOMPANY CAMPER AT REGISTRATION

CAMPER REGISTRATION FORM

Camper's Name	
Address	
Address 2	
City/State/Zip	
Home phone	()
Cell phone	()
Email	

Birth date	
Gender	
Age	
Fee	

- | | | |
|---|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Football | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Golf | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Track |
| <input type="checkbox"/> Diving | <input type="checkbox"/> Soccer | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Equestrian | <input type="checkbox"/> Softball | |
| <input type="checkbox"/> Tournament with camp | | |

Parent #1 or Legal Guardian

Name	
Phone	()
Email	
Occupation	

Parent #2 or Legal Guardian

Name	
Phone	()
Email	
Occupation	

Medical Information

Emergency contact	
Relationship to player	
Insurance carrier	

Phone	
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Policy	
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1. I/We the parents/guardians of the above-named player/participant, hereby give my/our approval to participate in any and all camp or tournament activities, including transportation to and from the activity.

2. I/We know that participation in sports may result in serious injury or death, and protective equipment does not prevent all injuries to players/participants. I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless the Board of Regents of the University System of Georgia, the University of Georgia, the University of Georgia Athletic Association, Inc., its administrators, coaches, staff and persons responsible for transporting my/our children to and from activities, from any claim arising out of injury or death to my/our child resulting from negligence or any other cause due to participation in sporting events, games, practices, exercise, tournaments, general training, or using the facility and its equipment.

Signature (Parent or Guardian)

Date

Signature (Parent or Guardian)

Date