

RHS Volleyball Summer Camp Registration Form

Student Name: _____ Age: _____

School: _____ DOB: _____

Address: _____

Parents Name: _____

Parents Number: _____

Parents Email: _____

Contact List and Pick Up List:

1. Guardian/Parent/Contact: _____

1. Cell Phone: _____

2. Guardian/Parent/Contact: _____

2. Cell Phone: _____

3. Guardian/Parent/Contact: _____

3. Cell Phone: _____

Allergies/Medical Information: _____

Shirt Size: (Circle One) YS YM YL S M L XL

Doors open at 7:45AM and pick up is at 3:00-3:30

Concession stand items will be available

Lunch Provided Daily

RHS Summer Volleyball Registration Waiver Camp

Waiver and Release Form for Summer Camp

Liability Release and Parental Consent Form in consideration of the acceptance of my application for the above program, I hereby waive, release, and discharge any, and all claims for damages for personal injury, property damages or which may hereafter occur to me as a result of participation in said event. This release is intended to discharge in advance the Volleyball Program and Staff, its Coaches, Players, and Volunteers from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above. It is understood that some recreational activities involve an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. It is further understood and agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assignees.

Parent/Guardian Consent (Complete if applicant is under 18) I give consent for my child _____
_____ to participate in the above activities, and I execute the above liability release on their behalf.

Consent for Treatment I hereby give my consent to have the above applicant treated by emergency medical personnel, a physician, or surgeon, in case of sudden illness or injury while participating in the above activity. It is understood that the Ridgeland High School Athletics will provide no medical insurance for such treatment, and that the cost thereof will be at my expense.

I have read and understood the foregoing registration liability release and parental consent form and agree to all of its terms and conditions.

Parent/Guardian Signature

Print Name Date

Camper Signature 12yrs+

Print Name Date