**2018 Bear Creek Summer Workout**

**PLAYER INFORMATION**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade\_\_\_\_\_ Parents Names \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Player Phone Number/email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent Phone Number/email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Release:**

 **We/I hereby request that you accept the student’s application for enrollment in the Bear Creek Football Summer Strength, Speed, and Conditioning Program. In consideration of your acceptance of this application, we/I hereby agree to release, indemnify and hold harmless Bear Creek High School, its agents, employees, representatives or assigns, including the BCHS athletic program, the coaching and training staff, from all claims resulting from any injury sustained by my child while traveling to and participating in the program/camp. We/I further hereby give permission to the coaches, training staff or other medical professionals to provide medical care as deemed necessary to my child in case of injury or illness.**

**Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_**