

2025 REGISTRATIO



PLAYER First Name **PLAYER** Last Name

PARENT First Name **PARENT** Last Name

Address

City State Zip Code

E-Mail Daytime Phone

WAIVER

I hereby acknowledge the health of my child, listed above, to be ready for vigorous activity and authorize the directors to secure any emergency treatment deemed necessary, and that I hereby release Langei Edge, Grand Forks Park District, Choice Health & Fitness, and all employees, executors, and heirs from all claims for injuries, which may be sustained by my child while attending this program. I also understand that any medical bills incurred by my child due to injuries will be my responsibility or the responsibility of my family health insurance plan.

REIMBURSMENT POLICY: We take pride in our camps by providing quality service to our athletes. As spots are limited and ice rented, we do not pro-rate or reimburse, with the exception of medical / family emergencies.

Parent / Guardian **SIGNATURE**

DATE



ELECT YOUR CAMPIS

SUMMER CAMP 1 June 2 - 19

PeeWees & 12U \$175

Bantam & HS Girls \$175 **HS Boys & Post Grad** \$175

Mites & 8U \$125

Squirts & 10U \$175

SUMMER CAMP 2 **August 3 - 21**

PeeWees & 12U \$175 Bantam & HS Girls \$175

HS Boys & Post Grad \$175

Mites & 8U \$125

Squirts & 10U \$175

FALL CAMP

Sept. 29 - Oct. 16

Squirts & 10U \$280

PeeWees & 12U \$280

Bantam & HS Girls \$280

HS Boys \$280

Mites & 8U \$125 Squirts & 10U (T/Th) \$175

Would you like information on our private sessions? | No | Yes - Individual Training | Yes - Group Training

PAYMENT OPTIONS



CASH or CHECK | Include your signed registration form along with a cash payment or check payable to Langei Edge and mail to 1620 13th Ave. SE, East Grand Forks, MN 56721



VENMO When paying, include your Name, Age Group & Camp. Then email Lan pic of the signed registration form.