



Egypt File Soccer Camp 2011 Registration Form



Child's name: _____

Parent/Guardian name(s): _____

Parent/Guardian Primary phone: _____ Secondary phone: _____

Mailing address: _____

E-mail: _____

Child's birth date: _____ Gender: _____

Grade in the fall: _____ Years played: _____

Child's T-shirt size: (circle one) **YS YM YL AS AM AL**

In case of emergency (when the parent/guardian cannot be reached) the church should contact:

Name: _____ Telephone: _____

Relationship to child: _____

Please list any allergies, medical or other special conditions the Egypt File team should be aware of:

If there is any concern that someone unauthorized might try to pick up your child, please explain below: _____

Return the registration fee along with this form and the medical release form (attached) to the church address below as soon as possible.

Hunters Creek Community Church
2471 Metamora Road
Lapeer, MI 48446
ATTN: Soccer Camp

Signature of Parent/Guardian

Date

Registration Fees: (Make checks payable to Hunters Creek Church)
Through July 14 - \$6.00, after July 14 - \$10.00, fee includes a T-shirt that the child can keep.
This year, balls will be provided by and remain the property of Hunters Creek Church

(DO NOT detach)

Medical Release Form Egypt File Soccer Camp,

WAIVER/RELEASE OF LIABILITY:

I hereby give my permission for my son/daughter to participate in the Hunters Creek Egypt File Soccer Camp; and I waive any or all rights to claims for damage arising from injury received while my child is participating. I hold harmless this Church, its organizers, sponsors, instructors, or supervisors appointed for any injuries incidental to the activities or transportation to and from these activities.

Parent/Guardian Signature _____ Date _____