SkateTowne Summer Camp Registration Form

Camper Name	Age
Address	
Parent/Guardian	
Email	
Parent/Guardian	
Phone Numbers	
Other Emergency Contact Name	9
Phone Number	Relationship
1 2	n(s) other than parents allowed to pick up your child: Phone: Phone: Phone: Phone:
4	Phone:
	ining orders must be attached to this form and discussed with camp director.) information you would like to provide about your camper: T-shirt (\$16.20): Circle YES NO Size
Date Paid/Check number	Control of the Contro

Waiver and Release Form for SkateTowne Summer Camp

Liability Release and Parental Consent Form

In consideration of the acceptance of my application for the summer recreation program, I hereby waive, release, and discharge any and all claims for damages for personal injury, property damages or which may hereafter occur to my child as a result of their participation in said summer program. This release is intended to discharge in advance SkateTowne, its owners, employees, 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.

Consent of the Parent or Guardian			
I give consent for my child,	to participate ase on my		
Consent for Treatment			
I hereby give my consent to have the above applicant treated by emmedical personnel, a physician, or surgeon, in case of sudden illness while participating in the above activity. It is understood that SkateTovide no medical insurance for such treatment, and that the cost there my expense.	ss or injury owne will pro-		
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		