

Risen Savior Soccer Bible Camp 2010

June 21-25, 9-11:30am
Risen Savior Lutheran Church

WWW.RISENSAVIORCHURCH.ORG

PARTICIPANT APPLICATION FORM

Parent's Name _____

Address _____ Zip Code _____

Phone Number _____ Work Phone _____

E-mail address _____

Church Home _____

Anything we should know about the health of any participating children with relevance to the activities we have planned? _____

Who to contact in case parents cannot be reached _____ Phone _____

1st Child's Name _____ Age _____ Year of Birth _____
Yrs. Soccer Experience _____ **Shirt Size** _____

2nd Child's Name _____ Age _____ Year of Birth _____
Yrs. Soccer Experience _____ **Shirt Size** _____

3rd Child's Name _____ Age _____ Year of Birth _____
Yrs. Soccer Experience _____ **Shirt Size** _____

4th Child's Name _____ Age _____ Year of Birth _____
Yrs. Soccer Experience _____ **Shirt Size** _____

**Tee-Shirt
Sizes**

**Youth
S,M,L**

**Adult
S, M, L, XL**

Participants must be age 5-10. Children and parents are responsible to bring their own soccer shoes, shin guards (mandatory), and sunscreen (recommended). We are providing soccer balls, water, and daily snacks. To cover expenses, there is a \$25 fee per child. There will be a \$5 discount for each additional child in the same family. Checks can be made out to "Risen Savior". Space is limited – first come, first served.

_____ Total amount _____ Check enclosed _____ I will pay when I drop my child off the first day

THE PARTICIPANT IS RESPONSIBLE FOR HIS OR HER OWN MEDICAL COVERAGE

NOTICE OF WARNING: There is a potential risk in training and participating in any sport, and we have tried to create a safe environment. The coaches have established rules for participation, and proper conduct on or about the playing field must be followed.

AGREEMENT: I have read and understand the policies and the risk involved. I hereby agree that my children will follow all rules for good order and safety during this camp. I agree and understand that neither Risen Savior Lutheran Church, nor any of the volunteers involved are liable for any injuries received while participating or playing in the activity for which I am registering herein, or for the loss or damage to equipment. I agree that I shall make no claim and bring no action, suit, or proceeding for any and all damages, losses, liabilities, or costs in any manner suffered or incurred as a result of my participating in the activity for which I am registering herein, and I hereby release Risen Savior Lutheran Church, and their officers, directors, and staff from any and all damages, liabilities, or costs in this regard.

PHOTOGRAPHS AND VIDEO: I understand that any pictures or video footage taken of my child by church personnel may be used in future promotional material for the church and its soccer camp.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND COMPLETE. I UNDERSTAND AND AGREE WITH IT.

SIGNATURE OF PARENT OR GUARDIAN

DATE

PLEASE FILL OUT THIS APPLICATION AND BRING OR SEND WITH PAYMENT TO:

Risen Savior Lutheran Church, 9664 Navarre Pkwy, Navarre, FL 32566