

Michael Griffin's

Orange & White Football Camp

Team Work | Leadership | Fundamentals | Skill Development



ORANGE & WHITE FOOTBALL CAMP 2009 REGISTRATION FORM

PLEASE CIRCLE T-SHIRT SIZE (ADULT SIZES): S M L XL

FIRST NAME: _____ LAST NAME: _____

ENTERING GRADE: _____ IN AUGUST 2009

SCHOOL ATTENDING IN 2009: _____

HOME ADDRESS: _____

CITY OR TOWN: _____ ZIP CODE: _____

BIRTHDATE: MONTH: _____ DAY: _____ YEAR: _____

MOM'S NAME: FIRST: _____ LAST: _____

DAD'S NAME: FIRST: _____ LAST: _____

HOME TELEPHONE #: _____

CONTACT IN CASE OF EMERGENCY: _____

EMERGENCY PHONE #: _____

DOCTOR'S NAME: _____ HOSPITAL'S NAME: _____

ANY SPECIAL MEDICAL KNOWLEDGE WE SHOULD KNOW ABOUT YOU:

My son _____, to my knowledge, is physically healthy to participate in this football program.

Parent or Guardian Signature: _____ Date: _____

(fill out parental consent form and waiver form on the next page before mailing)

PARENTAL CONSENT & WAIVER OF RESPONSIBILITY

In acceptance of (name of camp attendee) _____ as a student in the Orange & White Football Camp on July 11, 2009, it is agreed that: The Orange & White Football Camp will not be responsible or liable for any injuries to the above named student arising out of, or in connection with, the above said school. It is further agreed that all risks attendant to watching and/or participating in camp activities, including but not limited to bodily injury are assumed by the student and his parents or legal guardian, and that this assumption is acknowledged, approved and agreed to by said student and his parents and or legal guardian as indicated by their signatures hereto.

We have read the above, and have explained it's meaning to our student, and approve and consent to the terms and conditions as stated. We hereby represent that we are the parents and/or legal guardian signature of the above named student, and consent to his participation in the Orange and White Football Camp.

Parent or Guardian Signature: _____ **Date:** _____

MEDICAL INFORMATION:

I hereby certify that (name of camp attendee) _____ is physically able to participate in the Orange & White Football Camp and I know of no physical impairments which would in any manner limit his participation in such a program.

Parent or Guardian Signature: _____ **Date:** _____

ORANGE & WHITE FOOTBALL CAMP WAIVER FORM

I, _____ the player, and I, _____, the Parent/Guardian of the player who is under 18 years of age, give consent to the player to participate in the Orange & White Football Camp . We both know that football is a contact sport and it is possible that the player could be injured while participating in the Camp.

By signing this waiver form, each of us agrees that the entire camp staff or players shall NOT be responsible to either of us for any injury which the player may sustain while participating in the camp and we will not sue, commence any legal action against nor make any demand of claim against organizers.

I have carefully read this waiver form and each of us understands what it says and means.

DO NOT SIGN THE WAIVER FORM UNLESS YOU HAVE READ IT AND UNDERSTAND WHAT IT SAYS AND MEANS TO YOU.

Parent or Guardian Signature: _____ **Date:** _____

Send Completed Forms To:

Orange & White Football Camp
3104 Port Anne Way
Leander, TX 78641