2018 BARTLETT HIGH SCHOOL SUMMER CHEER CAMP
REGISTRATION FORM

Student's Name ____

Parent/Guardian's Name ____

Address ______________________________________ City _______________________

Home Telephone ______________________________________

Emergency Contact Name and Telephone ____

School Attending _____________________________ Grade (2018-2019) ____________

AMOUNT PAID _______________________ CASH/CHECK NUMBER ________________

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MEDICAL CONCERNS AND WAIVER

LIST ANY MEDICAL CONCERNS/ALLERGIES ___________________________________

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PARENT/GUARDIAN PERMISSION AND RELEASE

I give my consent for my child to participate in the 2018 Bartlett Cheer Summer Camp. I understand the possibility that injury may result from participation. I assume all risks and hazards that are incidental to participation in the Bartlett Cheer Summer Camp. I further agree to release, absolve, indemnify, and hold harmless the BCS School District, Bartlett High School, Bartlett Ninth Grade Academy, teams, coaches, assistant coaches, sponsors, organizers, supervisors, and volunteers of all legal responsibility for the injury or death of named child.

Parent/Guardian Signature ____

Date _________________________