



**Jeffersonville Parks and Recreation
2010 All-Sports Camp (\$50 per Participant)**

Registration Form

Participant's Name: _____

Age: _____ Grade: _____ School: _____

T-Shirt Size: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Parent/Guardian: _____ Phone: _____

Emergency Contact: _____ Phone: _____

As the parent/guardian of the participant registering, I authorize the staff of the Jeffersonville Parks and Recreation and Jeffersonville High School and its coaches to act on my behalf and use their judgment in any emergency requiring medical attention. Furthermore, I hereby waive and release the staff of the Jeffersonville Parks and Recreation and Jeffersonville High School and its coaches from any and all liability related to injuries, illness, or loss of property incurred while participating in this camp.

Parent/Guardian Signature

Date