

## Soccer Camp - 2017 Registration

<b>Week 1 July 24-28</b>	<b>5 to 10 years</b>	_____	<b>1-3pm</b>	<b>Islesboro Central School</b>	<b>\$50</b>
<b>Week 2 July 31-August 4</b>	<b>11 to 14 years</b>	_____	<b>1-3pm</b>	<b>Maddie Dodge Field</b>	<b>\$75</b>

### PARTICIPANT INFORMATION

Participant: \_\_\_\_\_ Gender: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

### Medical Concerns / Conditions

Medications / Allergies: \_\_\_\_\_

Date of Last Physical: \_\_\_\_\_ Date of Last Tetanus Shot: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Doctor's Address & Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Primary Parent / Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Secondary Parent / Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**NOTE:** In the event of emergency, your child may be transported in a private vehicle.

**Town of Islesboro Recreation Department Participant Release** (Assumption of Risk Agreement/Agreement to Indemnify & Hold Harmless):

In consideration of the participation of the minor named above being permitted to participate in Soccer Camp, Town of Islesboro, Wk. 1 July 24-28 at Islesboro Central School, and Wk. 2 July 31-August 4 at Maddie Dodge Field.

Each person signing below understands that participation in the Town of Islesboro ("Town") program, activity and/or special event can involve the risk of damage and injury, including serious injury, to both people and property. Each person signing below understands and agrees that the Town, its agents, officers and employees, accept no responsibility, and will not be liable, for any injury, harm or damage to his/her person or property (including, but not limited to, injury, harm or damage caused by negligence of the Town, its agents, officers or employees) occurring during or arising out of participation in any Town program, activity and/or special event. To the fullest extent permitted by law, each person signing below agrees to assume all risk of injury, harm or damage to his/her person or property arising during or in connection with said Town program, activity and/or special event. Each person signing below hereby releases and agrees to indemnify and hold harmless the Town, its agents, officers and employees, from any and all liability, actions, damages and claims of any kind and nature whatsoever for any injury, harm or damage to his/her person or property (including, but not limited to, injury, harm or damage caused by negligence of the Town, its agents, officers or employees) that may arise or occur during or in connection with said program, activity and/or special event. Each person signing below further understands and agrees to abide by safety rules, regulations and policies at all times.

\_\_\_\_\_  
Signature of Participant (if under 18, must also be signed by Parent or Guardian)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian (if Participant is under 18)

\_\_\_\_\_  
Date