

UltimateSpirit Summer Camp - Registration Form

Date of birth Age Grade in school

Name School Attending

E-mail:

Emergency Information

Contact Name: _____

Contact Phone Number: _____

Insurance Provider: _____

Policy Number: _____

I give my permission for _____ to participate in the 78704 Ultimate Summer Camp. Summer, Ultimate! camp will meet for from 9am-noon, for players entering 3rd through 5th grades. We will be provide a mid-morning snack, and dismiss before lunch. Middle School players will meet from 10am-3pm. Players entering grades 6-8 should bring a sack lunch, a refillable water bottle, and a swimsuit and towel. Appropriate footwear is required (tie shoes).

Session I June 6-10, 2011 or Session II August 8-12, 2011.

(please circle a session where the dates fit your schedule)

I understand that Texas, Ultimate! does not provide accident and hospitalization insurance, and there is some inherent risk or danger in participating in Ultimate activities. I do not hold Texas, Ultimate! liable for accident or injury resulting from participation. Further, I give Texas, Ultimate! permission to use my child's image in it's promotional materials including, but not limited to, brochures, ads, and website. I understand my child's name will never be used in conjunction with their image.

Cost per session is \$125 per player. Drop-ins will be accepted for a \$25 daily fee.

Checks may be made payable to TEXAS, Ultimate!

Mail completed registration and payment to: Texas, Ultimate! PO Box 3567 Austin, TX 78764-3567

Signature of Parent/Guardian

Date