

# Skate Factory Skate Camp Registration

*There is a yearly registration fee on \$15.00 due at the time of registering.*

Childs Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Child's home phone \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Mother's Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Email \_\_\_\_\_

## **In Case of EMERGENCY**

**Phone**

Allergies/Limitations \_\_\_\_\_

Weeks Attending \_\_\_\_\_

Others Authorized To Pick Up Child

Name: \_\_\_\_\_ Phone \_\_\_\_\_

Name: \_\_\_\_\_ Phone \_\_\_\_\_

## **AGREEMENT AND RELEASE OF LIABILITY STATEMENT**

I hereby state my child is physically and mentally capable of safe participation in the Skate Factory Skate Camp Program. I assume all risks and hazards incidental to the conduct of this program. My child may be transported to and from all field trips in the Skate Factory Bus.

I authorize Skate Factory to obtain medical treatment for my child in the event the parent(s), guardian or emergency contact cannot be reached.

I have read and am voluntarily signing this authorization and release.

Name of Insurance

Company \_\_\_\_\_ Policy# \_\_\_\_\_

Parent or Guardian

Signature \_\_\_\_\_ Date \_\_\_\_\_

*There is a yearly registration fee on \$15.00 due at the time of registering.*