

212 WELS Soccer Camp | August 5-9 Voelz Athletic Field in Danube PARTICIPANT APPLICATION FORM

Office Use Only: Paid	Cookout #	
Unpaid		

Last Name of Participant(s) _							
Names of Parent(s) or Guardi	an(s)						
Address		PO Box					
City State		Zip Code					
Phone # Work #		Other #					
E-mail address		1					
Church Home		Cit	ty				
Anything we should know abo	out the health of any	participant	s with releva	ance to the activities we ha	ave planned:		
Emergency Contact							
(relationship to camper)							
1 st Child's Name		Age	Yrs. So	occer Experience Shirt Size	Jersey Sizes		
2 nd Child's Name		Age	Yrs. S	occer Experience Shirt Size	Youth S,M,L		
3 rd Child's Name		Age	Yrs. S	occer Experience Shirt Size	Adult		
4 th Child's Name		Age	Yrs. S	occer Experience Shirt Size	S, M, L, XL, XXL		
Our camp is designed for all chil bottles, and daily snacks. To covparticipate in the camp the cost v "212 WELS Soccer Camp". Spa shoes (suggested), shin guards (n Total amou	ver expenses, there is a vill be \$30 for the first ace is limited – first conandatory!), and sunso	a \$30 fee per t child and <u>\$</u> ome, first ser creen (highly	child (for far 15 for each a ve. Campers recommend	milies with multiple children dditional child). Checks can are responsible to bring their	who wish to be made out to own soccer		
Will you be attending our annu	ual end of camp coo	kout on Fri	day? Y / N	Number of family membe	rs?		
THE NOTICE OF WARNING: There is a potent established rules for participation, and prop AGREEMENT: I have read and understant this camp. I agree and understand that ne any injuries received while participating or no claim and bring no action, suit, or proce in the activity for which I am registering he Region of Renville Country school board frour facebook page and our website www.	per conduct on or about the id the policies and the risk in ither 212 WELS Soccer cam playing in the activity for whi eeding for any and all damag rein, and I hereby release 21 om any and all damages, lia PICTURES OI 212welssoccercamp.com ex	pating in any spoplaying field muvolved. I hereby pany of the chuch I am register es, losses, liabil 2 WELS Socces N WEBSITE AN ist to help promo	ort, and we have st be followed. y agree that my curches sponsoring ing herein, or for ities, or costs in a r Camp and its oin this regard. D FACEBOOK Fote our camp through the street of the street our camp through the street	tried to create a safe environment. Thildren will follow all rules for good or g said camp, nor any of the volunteer the loss or damage to equipment. It any manner suffered or incurred as a fficers, directors, and pastors, the CityPAGE	rder and safety during rs involved are liable for agree that I shall make result of my participating y of Danube, and the		
I HEREBY CERTIFY THA	T THE ABOVE INFORMATION	ON IS CORREC	T AND COMPLE	TE. I UNDERSTAND AND AGREE	WITH IT.		
SIGNATURE OF PAREN	SIGNATURE OF PARENT OR GUARDIAN			DATE			
PLEASE FILL OUT THIS APPLICATION AND SEND WITH CHECK TO:				Registration Deadline			

212 WELS Soccer Camp PO Box 67 Danube, MN 56230 July 18, 2019