

Soccer Camp 2017 July 9-13, 2018 **Lisgar Soccer Fields PARTICIPANT** APPLICATION FORM

\$60 through June 18 \$75 after June 18

Fill this registration sheet in and bring it to Lisgar Soccer Fields on the first day of camp along with the \$75 fee. Cheques can be made payable to "Cross of Life."

Address		City	
Home Phone	Cell Phone	Work Phoi	ne
Which number is best to reach	you at?		
E-mail address			
Church Home(Flyer? Fa	How d	lid you <u>first</u> find out about thi	is camp?
Total number of people coming			
Who to contact in case of eme	rgency	Phone	
1 st Child's Name Shirt Size (YXS, YS, YM Any health concerns?	M, YL, AS, AM, AL, AXL, AXXL)	Date of Birth//_	
2 nd Child's Name Shirt Size (YXS, YS, YM Any health concerns?	Age , YL, AS, AM, AL, AXL, AXXL)	Date of Birth//_	M F
3 rd Child's Name Shirt Size (YXS, YS, YM Any health concerns?	Age , YL, AS, AM, AL, AXL, AXXL)	Date of Birth//_	M F
4 th Child's Name Shirt Size (YXS, YS, YM Any health concerns?	Age , YL, AS, AM, AL, AXL, AXXL)	Date of Birth//	M F
Kids must be age 4-14. They are resp We are providing Soccer Camp Jersey out cheques to "Cross of Life." Space	s, balls, and daily snacks. To cove	er expenses, there is a \$75 fee per	child. (\$60 through June 18) Make
Cheque Cash	Total amount (p	ayment must be received be	efore application is complete

NOTIC participation, and proper conduct on or about the playing field must be followed.

AGREEMENT: I have read and understand the policies and the risk involved. I hereby agree that my children will follow all rules for good order and safety during this camp. I agree and understand that neither Cross of Life Lutheran Church, nor any of the volunteers involved are liable for any injuries received while participating or playing in the activity for which I am registering herein, or for the loss or damage to equipment. I agree that I shall make no claim and bring no action, suit, or proceeding for any and all damages, losses, liabilities, or costs in any manner suffered or incurred as a result of my participating in the activity for which I am registering herein, and I hereby release Cross of Life Lutheran Church and its officers, directors, and pastor, the City of Mississauga, and the Region of Peel District School Board from any and all damages, liabilities, or costs in this regard. I also agree that by signing this form, the email address I have given can be used by Cross of Life to inform me of future church programs. I may unsubscribe at any time. PHOTOGRAPHS AND VIDEO: I understand that any pictures or video footage taken of my child by church personnel may be used in future promotion material for the church soccer camp, printed or online.

CANCELLATION POLICY: A fee of \$15 applies to all cancellations. If cancellation is received 10 days prior to start of camp, a refund (minus the cancellation fee) will be made. No refunds will be made for cancellations after July 3. No refunds will be given for cancellations due to inclement weather. CoL is not responsible for lost items belonging to participants

WEATHER POLICY: We generally will play through light rain, and ask participants to bring proper clothing and gear. If weather forecast makes it impossible to even begin camp, we will try to have announcements posted on our web site. If weather becomes severe after we begin a day's session, (thunder, lightning, hail), we will take the kids over to the large shelter at Lisgar Park across from Lisgar Middle School's parking lot. Camp personnel will wait with children there as long as necessary. Parents can pick their children up during this time if possible. If the severe weather subsides, the remaining participants will go back onto the fields and continue the camp as scheduled.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND COMPLETE. I UNDERSTAND AND AGREE WITH IT. SIGNATURE OF PARENT OR GUARDIAN DATE