

# Xtreme 2013

camp registration  
6th-12th grade (completed)

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

Current grade (before June): \_\_\_\_\_

Invited by: \_\_\_\_\_

School: \_\_\_\_\_

Age:      Gender: M F      First-time: Y N

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Cell: \_\_\_\_\_

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

Emergency Contact information:

Contact name: \_\_\_\_\_

Contact relation: \_\_\_\_\_

Contact phone: \_\_\_\_\_

I give my consent to medical treatment as needed in the judgment of the treating physician chosen by representatives of FBC McKinney. I also give FBC McKinney and it's representatives permission to transport my child at their discretion in case of emergency. I do hereby agree to hold FBC McKinney, their agents and employees harmless of any and all liability, actions causes of actions, claims, expenses and damages on account of injury to my child, property, even injury resulting in death, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities. Lack of cooperation with Xtreme Camp policies will result in a student returning home. Still photos and video taken at this event may be used for broadcast and promotion of this event or similar events. There is a \$50 non-refundable administrative fee.

Parent/Guardian signature:

\_\_\_\_\_

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