Belmont Cheer Team – Mini Cheer Camp Registration Form Friday October 19, 2018 9 am to 4 pm

Please fill out this form <u>completely</u> and drop it off in the main office, or email it to <u>rsandberg@sd62.bc.ca</u> by February 12, 2018. Payment must made by Friday October 12, 2018 (before 2:00 pm) at the Belmont Secondary School main office or online at <u>https://sd62.schoolcashonline.com/</u>

PLEASE PRINT ALL INFORMATION:

If you are registering more than one camper, please use separate registration forms.

Camper's Last Name:		First Name:	MI:
Date of Birth:	Age:	Grade:	
BC Heath Care #:		School:	
Address:			
City:	Prov:	Postal Code:	
Parent/Guardian Name(s):		
Address:			
City:			
Email:			
Home Phone:		Cell Phone:	
Sign In/Out Contact Info	ermation (Perse	on signing the camper i	in & out – ID will be REQUIRED.)
Sign In:			
Name			
Relationship		Cell Phone	
Sign out: (if different from	n Sign in)		
Name			
		Cell Phone	
Please intial:			

_____ PARENT DROP OFF/PICK UP: The person picking your child up must match the name on the registration form. ID will be required. Your child's safety is most important to us.

_____ SNACKS / LUNCH: EACH CHILD MUST BRING THEIR OWN LUNCH, SNACKS, AND WATER BOTTLE

DIGITAL PICTURES: Pictures will be taken throughout camp and may be uploaded to the Belmont Cheer Team Facebook page, the Belmont Secondary website, or the SD62 website, and may be used for future promotions for the School District, Belmont Secondary, or the Belmont Cheer Team.

Mini Camp Medical and Liability Waiver

I understand that my child, (child's name) ______, will be participating in the Belmont Cheer Team Mini Cheer Camp on October 19, 2018.

I/We understand that our son/daughter is required to be in good physical shape and condition and that the activities, which he/she will be asked and expected to participate in, are strenuous and require physical and athletic agility. I/We understand that cheerleading is an activity in which the risk of injury is high.

I/We have also discussed this with our child and among ourselves. Despite this understanding of the possibility of serious injury and the risks involved, we still consent to the participation in this activity by our son/daughter. To the best of our knowledge and belief, our son/daughter has no physical, medical, or mental disability or other limitation that would restrict his/her ability to fully participate in this activity.

I/We agree to, and by the signing of the agreement, release the coaches, volunteers, staff of Belmont Secondary School, and the SD 62 Board of Education from any claim of negligence by ourselves, our son/daughter, our heirs, executors and assigns, from any liability arising from claims for damages for injury to our son/daughter and any claims for loss or damage to his/her property which may arise our of his/her participation in the Belmont Cheer Team Mini Camp on October 19, 2018.

I/We further acknowledge that the above individual is covered by health insurance the particulars of which are provided prior to participating. I hereby agree that we are responsible for any required medical treatment, and give permission for my child to receive medical treatment in the event that I am unable to be contacted. I do give consent for my child to be treated at the nearest emergency room.

Please list any allergies or health concerns we should be made aware of for your child, and any required special medications or treatments: (**Please note: Belmont Secondary is NOT an allergen free zone**)

Is there anything else we should know about your child? (Custody issues, special modifications, etc)

Parent/Guardian name (Printed)

Parent/Guardian signature _____

Date _____