



& ALL-AMERICAN COLLEGE PREP PROGRAM

Registration and Release



District 2 Skills Camp

Medical Insurance

Participants are required to be medically insured and the medical release form on the next panel must be completed and signed in order to participate.

Equipment

You must bring your own softball equipment to the All-Skills Camp.

Reservation and Payment

To reserve your spot email

Kelly@softballschoo.com or fax the registration

/ medical form to: (916)374-0720

Or bring registration and fee to:

The clinic on Sunday March 4th, 2018

For more information call (916) 374-1907

Full Name: _____ Age: _____

Email Address: _____

Parent's Name and Address: _____

Medical Insurance Company: _____

Subscribers Name: _____

Insurance Policy #: _____ Group # _____ ID # _____

I hereby register my daughter for the (date:) _____ Camp and authorize the staff to direct her in participation in Camp activities. My daughter has no medical problems which may affect her participation in your program. The staff is authorized to attend to any health problem or injury my daughter may incur while attending Camp. I understand that my daughter must have current medical insurance before she may attend the Camp. Neither my daughter nor I will hold All American Softball, Inc. liable for any injuries or expenses relating to injuries while my daughter is at Camp.

Date _____ Signature of Parent/Guardian _____

I HAVE PAID VIA PAYPAL (this is preferred)

CASH: \$ _____ CHECK #: _____

VISA or MASTERCARD:

CC Number: _____

Expiration Date: _____ 3-digit code on back of card: _____

Yes, I authorize this charge of \$ _____ on my Credit Card.

Signature of card holder: _____

PHOTOS: As parent/guardian of attendee, I understand that photos may be taken at this event that may show attendee, and that the images obtained by California College Prep may be used by them in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me or attendee by reason of such use.

_____ I have read and agree to these terms _____ SIGNATURE