

## **Registration Form**

Camper's Name:	Date	Date:	
Address:	City:		
Home Phone:	Parent/Guardian Phone:		
2023-24 Grade: Birthdate	e: Email:		
Parent/Guardian name:			
Camp Name & Date:			
T-shirt size (*if offered at this ca	mp): YS YM S M L XL		
How did you hear about this can	1p?		
Does your child have a medical of	ondition or take any medication we need	d to be aware of?	
YesNo - If yes, please speci	fy:		
	to certify that I,		
Academy to obtain care from any	, hereby grant permission to licensed physician, hospital or medical classed physician, hospital or medical classed in the contacted in t	inic for the player	
indemnify ReJoyce Academy and	clude all activities and we do hereby waive staff, The Salvation Army, sponsors, the c n any claim arising out of an injury to the	organizers,	
documentation including publicit their image/likeness may appear camp. By registering for the educing permission that photos, video, ar image/likeness may be used for pon the ReJoyce Academy, King Corelated publicity which may be see	basketball fitness camp understand that recorded during in multimedia materials recorded during reation and basketball fitness camp, you he additional multimedia content containionablicity or general information purposes bunty YASG, or The Salvation Army websiteen by the general public. The ReJoyce Acade any notification before using such multiples in the salvation and such multiples.	ng the event, and the reby give ng your including publication es, or within other ademy will not seek	
Signed	Date		