

Corning Union High School
Girls Basketball Camp Registration

Registration: 11:00 on Monday, July 10th in the North Gym. Applications will also be available during registration. **Applications must be signed by a parent/guardian.**

Player Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Grade Entering: _____

Emergency Contact Information

Name: _____

Phone Number: _____

Assumption of Risk/ Waiver of Rights

In consideration of your acceptance of my registration in the Corning Union High School Girls Basketball Camp, I hereby, for myself, my heirs, my executors and administrators, assume all risk of injury from my attendance at or participation in the camp or other camp events, and release and waive any and all rights and claims I have against the sponsors, organizers, Corning Union High School and Corning Union High School District and other persons associated with the camp for damages, loss or injuries I may suffer in connection with the camp or other camp events. I understand I am responsible for my own conduct and voluntarily accept the risk of injury or loss resulting from my participation in the camp and camp related activities. I, for myself, my heirs, executors and administrators release and also agree to defend, indemnify and hold harmless Corning High School Girls Basketball and Corning Union High School District and other persons associated with the camp for any and all loss, damages, and injury I can occur as a result of the negligence of Corning High School or any of them. No health care professional or any other person has told me not to participate in this clinic due to health reasons.

Signature of Athlete

Signature of Parent/Guardian

OFFICE SECTION: Paid \$50 for camp ___ YES ___ NO