



# 2016 K & J Summer Basketball Camp

Multipurpose Sports Complex  
July 4th –22, 2016  
9:00 a.m. – 4:00 p.m.

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## REGISTRATION FORM

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact #: (1) \_\_\_\_\_

(2) \_\_\_\_\_

The camp is open to children **5 and older @ \$65 per child.**

Contact Jason @ 540-4756 or Kennedy @ 499-7989

kandjbasketballbvi@gmail.com

### Waiver and Release Form for the 2016 K&J Summer Basketball Camp

#### *Liability Release and Parental Consent Form*

In consideration of the acceptance of my application for the said program, I hereby waive, release, and discharge any and all claims for damages for personal injury, property damages or which may hereafter occur to me as a result of participation in said event. This release is intended to discharge in advance K&J organization, its officials, officers, employees, volunteers and agents from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above.

It is understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assignees.

#### **Parental Consent**

*(Complete if applicant is under 18)*

I give consent for my child \_\_\_\_\_ to participate in the above activities, and I execute the above liability release on their behalf.

#### **Consent for Treatment**

I hereby give my consent to have the above applicant treated by emergency medical personnel in case of sudden illness or injury while participating in the above activity. It is understood that K&J Basketball organization will provide no medical insurance for such treatment, and that the cost thereof will be at my expense.

I have read and understood the foregoing registration liability release and parental consent form, and agree to all of its terms and conditions.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Print Name