

# 2011 RailHawks Soccer Camp Registration Form

Please complete the following registration form and return with payment to 101 Soccer Park Dr. Cary, NC 27511. Make Checks Payable to: Carolina RailHawks

## Player Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Age (as of week of camp): \_\_\_\_\_ Birth Date: \_\_\_\_\_ Gender: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

What club are you affiliated with or N/A: \_\_\_\_\_

T-Shirt Size: \_\_\_\_\_

## Family Contact #1

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Relation to Player: \_\_\_\_\_

## Family Contact #2

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relation to Player: \_\_\_\_\_

## Other

Please list anyone else approved to pick up your child: \_\_\_\_\_

Does your child have any allergies or medical conditions: \_\_\_\_\_

Enter your camp code as found on the brochure. \_\_\_\_\_

I for myself or as parent or guardian, hereby assume all of the risks and hazards incidental to the conduct of the activities and transportation to and from activities, and indemnify the Town of Cary, employees of the Town, the Carolina RailHawks, volunteers, contractors and/or sponsors from all risks and hazards associated with the activities and in the event of injury, do expressly waive all claims against them. I understand that no insurance coverage is provided by the Town of Cary Parks, Recreation and Cultural Resources Department or the Carolina RailHawks.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date