

COLMESNEIL BULLDOG SUMMER CAMPS 2018

Football

DATES: 7/25-26
TIME: 8am-10am

(@home-SFA host)

7-12 Volleyball

DATES: 7/30
TIME: 7th/8th 9am-12
9th-12th 12-2pm

1st-6th Volleyball (20\$)

DATES: 7/31
TIME: 1st-3rd 9am-12
4th-6th 1pm-4

Basketball B/G

DATES: 6/11-14
TIME: 10am-12

Softball

DATES: 6/19-20
TIME: 9am-12

Baseball

DATES: 6/25-26
TIME: 9am-12

(Please mark the box of each camp your student will attend)

Name: _____

Grade for Fall 2018: _____ School: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian: _____ Phone: _____

Emergency Contact (other than listed): _____

Relationship: _____ Phone: _____

Family Doctor: _____ Phone: _____

Insurance Provider: _____

Policy Number: _____

T-shirt size (circle): YS YM YL AS AM AL AXL A2X A3X

T-shirts will be provided. Please dress each day in gym shorts, t-shirt, cleats or and bring your tennis shoes. Bring with you daily a water bottle with your name on it!

\$35(per camp) 1st Grade-Incoming Freshmen

Please make checks payable to Colmesneil
athletics

Office Only	
Paid: _____	Initials: _____
Amount: _____	_____
Date: _____	_____

Ross.McMurry@Colmesneilisd.net
2018 Colmesneil High school Summer Camp Waiver:

Name of Camper: _____ DOB: _____

Parent/Guardian: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Emergency Contact 1: _____

Phone: _____ Email: _____

Emergency Contact 2: _____

Phone: _____ Email: _____

Acknowledgement of Risk: I hereby acknowledge that I have voluntarily chosen to allow my child to attend Colmesneil High school's Summer Camp. The activities in which my child may participate at camp may include, but are not limited to: _____. **I understand the risks involved in these activities.** I recognize that each camp activity involves risk of injury to my child and I agree to accept any and all risks associated with it. By voluntarily allowing my child to participate in camp activities and with the knowledge of the risks involved, I hereby agree to accept any and all inherent risks. **Consent to Administer Non-Emergency First Aid:** I understand and acknowledge that occasionally a non-emergency may develop which necessitates the administration of non-emergency First Aid to my child. Therefore, in the event of non-emergency injury or illness which necessitates the administration of non-emergency First Aid, I hereby authorize Colmesneil High school's Summer Camp to administer any necessary non-emergency First Aid. Non-emergency First Aid treatment may include, but is not limited to: cleaning, applying anti-biotic ointment to, and bandaging cuts or abrasions; removal of ticks or splinters; and applying an ice-pack to bites, stings, or an injury. The following substances may be used in the administration of non-emergency First Aid: water, ice pack, ACE bandage, antibacterial soap, alcohol swabs, anti-biotic ointment, and Band-Aids. No oral medication will be administered unless authorized and directed by the child's parent/guardian. I understand that if I do not consent to the administration of non-emergency First Aid or to the administration of any of the substances listed above, I will give written notification to Colmesneil High school's Summer Camp no later than seven business days before the camp session begins. **Consent to Administer Emergency First Aid:** In the unlikely event of a life or limb-threatening emergency, I give consent to Colmesneil High school's Summer Camp and its staff to administer emergency First Aid as a first response until more advanced medical care is available. I understand that Colmesneil High school's Summer Camp and its staff will use their best judgment, act in good faith, and will treat with the intention of not causing further harm. **Consent to Arrange Emergency Treatment:** I understand and acknowledge that on rare occasions an emergency may develop which necessitates the administration of medical care, dental care, hospitalization, or surgery to my child. Therefore, in the event of injury or illness to my child which necessitates emergency medical or dental care, I hereby authorize for the Colmesneil High school's Summer Camp and its staff to arrange any necessary emergency treatment including the administration of anesthetics and surgery to my child. I also understand that a parent/guardian will be contacted at the earliest possible moment in the event of an emergency relating to my child. **Medical, Dental, Health, and Insurance Responsibilities:** I understand and acknowledge that Colmesneil High school's Summer Camp cannot assume responsibility for determining the medical, dental, or health condition of my child. Therefore, I have consulted with a medical doctor and/or dentist, as I have deemed necessary, with regards to my child's individual medical or dental issues or needs, and find my child physically and mentally fit to participate in the Colmesneil High school's Summer Camp. If my child is required to receive medical, dental, or hospital services during camp, I am aware that Colmesneil High school's Summer Camp cannot and does not assume legal responsibility for payment of such costs; rather, I hereby assure Colmesneil High school's Summer Camp that I have assumed all risk and responsibility thereof and that my child has the necessary insurance to meet any and all needs for payment of these services during Colmesneil High school's Summer Camp. **Permission to Use Photograph or Likeness:** I hereby give my permission to Colmesneil High school's Summer Camp to use my child's photographic image, in whole or in part, for camp-specific public information and for marketing activities at the discretion of Colmesneil High school's Summer Camp. I understand that the photograph remains the property of Colmesneil High school's Summer Camp.

Check this box if you do NOT give the above permission to use your child's photograph or likeness.

I HAVE CAREFULLY READ THIS AGREEMENT. I FULLY UNDERSTAND ITS CONTENTS AND SIGN IT OF MY OWN FREE WILL.

Name of Parent/Guardian of Child Listed Above (please print) _____

Signature of Parent/Guardian _____ Date _____