

UNITED WATER POLO CAMP REGISTRATION FORM

CAMPER'S NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____

HOME PHONE: _____ CELL: _____

FEE: \$250 payable to UNITED WATER POLO

T-SHIRT SIZE (please circle): SM M L XL XXL

PARTICIPANT'S RELEASE OF CLAIMS

I, _____, wish my SON/DAUGHTER (please circle),
(print parent name)

_____, _____,
(print your child's name) (child's date of birth)

to participate in the United Water Polo Camp, located at Foothill College. As his/her parent, and on my child's behalf, I make the following statements voluntarily, and with the full intent that they will be relied upon:

I understand and acknowledge that the sport of water polo is a potentially risky activity in which my child may be injured. I understand that it carries this risk whether or not conducted reasonably, or with negligence. Foothill College is willing to allow this activity to occur on college property but cannot guarantee my child's safety if he/she participates.

I therefore release Foothill College, United Water Polo, its officers and employees from liability of any kind arising of any injury to my child, however serious, which occurs because of or in connection with the activity. I further agree that this release shall apply even if my child's injury is caused by negligence of an officer or employee of United Water Polo or Foothill College. On behalf of my child, myself, my guardians, heirs and estates, I covenant not to sue Foothill College, United Water Polo, its officers and employees in the event he/she is injured.

MEDICAL TREATMENT RELEASE

If my child is injured while participating in the United Water Polo Camp, I hereby consent to he/she receiving emergency medical treatment at the scene, and if necessary ambulance transportation to an appropriate hospital or other medical care center.

() _____

Daytime Phone Number & Contact Person

() _____

Emergency Phone Number & Contact Person (different then daytime contact)

Return this form along with a check payable to UNITED WATER POLO to:

United Water Polo
122 Del Prado Dr.
Campbell, CA 95008

If you have any questions please email Coach Bissell at jbissell47@yahoo.com