	Trior Soccer Camp the WGHS Coaching Staff)
5	uesday, Wednesday, and Thursda	(y)
	alnut Grove High School	
	n – 12:00pm & Price: \$75	
	¹ graders to Rising 8 th graders	
ŭ č	6 for 2 nd child, 75% for 3 rd , 4 th fr	<i>ee</i>)
e	REGISTRATION: June 10th	
	so please return form ASAP**	
Camper's Name:		Age:
(Last)	(First)	
Home Address:		
(Street)	(City, State, Z	
Name of Parents/Guardians:		
E-mail address:	T-Shirt size	

Release Waiver of Liability (please read carefully before signing)

The undersigned hereby acknowledges that participation in this camp and related activities involves an inherent risk of physical injury and the undersigned, on behalf of the registrant, hereby assumes all such risk and does hereby release and forever discharge the camp and all employees and agents thereof from any and all liability of whatever kind and nature, arising from and by reason of any and all known, foreseen and unforeseen, bodily and personal injuries, damage to property, and the consequences thereof, resulting from this registrants participation in or involvement with this camp, including any failure of equipment or defect on or in the premises.

I hereby state that	at I am legal guardian of said ch	ild:
Date:l	Participants Name:	Parent Signature:
Insurance Inform	nation: Primary Company Nam	e:
Policy #:	Group #:	Phone #:

*****RETURN REGISTRATION FORM AND CHECK PAYABLE TO***** "WGHS Soccer Booster Club"

TO: WGHS Soccer Booster Club Warrior Soccer Camp, P.O. Box 1636, Loganville, GA 30052 **Please direct questions and inquiries to Nicole Greene at <u>404-402-8924/nicole.greene@walton.k12.ga.us</u> Or Dane Callahan** <u>770-853-8054/dane.callahan@walton.k12.ga.us</u>