

"SUPER SOPHS" COMBINE CAMP - APPLICATION

June 18 Through June 21, 2008

Camper's Name _____ Positions: Attack Goalie Midfield Defense
Address _____ City _____
State _____ ZIP _____
E-mail _____
Date of Birth _____ School _____
Attending _____
Home Phone _____ Emergency Phone _____
Coach _____ Grade entering in September in 2007 _____
Height _____ Weight _____ Shirt size _____

WAIVER & RELEASE: FOR GOOD AND VALUABLE CONSIDERATION, RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, WE THE UNDERSIGNED, FOR OURSELVES, OUR HEIRS, EXECUTORS AND ADMINISTRATORS, WAIVE , RELEASE AND FOREVER DISCHARGE THE SUPER SOPHS LACROSSE CAMP, ITS STAFF, OFFICERS, AGENTS, REPRESENTATIVES, EMPLOYEES, SUCCESSORS AND ALL RIGHTS AND CLAIMS FOR DAMAGES, RESULTING FROM INJURY OR PROPERTY WHICH MAY BE SUSTAINED OR OCCUR DURING PARTICIPATING CAMP ACTIVITIES OR ARISING FROM TRAVEL TO OR FROM CAMP, WHETHER SAID DAMAGES , INJURY OR LOSS ARE DUE TO NEGLIGENCE OR NOT.

Applicant's Signature _____ Date _____
Parent Signature _____

MEDICAL FORM

Camper's Name _____ Date of last tetanus shot _____
Allergies _____ Current _____
Medications _____

IN CASE OF EMERGENCY NOTIFY

Name _____ Relationship _____
Phone _____ Name _____
Relationship _____ Phone _____

Does the applicant have any known allergies to any food or medication q yes q no If yes, please list _____

Is applicant covered by medical insurance q yes q no If yes, please provide the following information
Name of company _____ Policy# _____

Address _____ Phone _____

I give permission to the college Health Center and Athletic department medical staff at Gettysburg College to carry out such emergency diagnostic and therapeutic procedures as may be necessary for my son and in the physician's absence for the medical staff on duty to render emergency care in line with standing orders, and also permit such procedures to be carried out at and by one of the local hospitals in the event that my son has been sent or taken there for emergency care.

Signed _____ Date _____
Relationship _____

Camp Cost: \$475 per week. Camp held at Gettysburg College in Gettysburg, PA.

Includes room and board, recreational facilities, swimming pool, and mesh jersey.

Key Deposit: **\$60** (send **separate check** with application to be returned at the close of camp)

A **\$200 non-refundable** deposit (payable by check) will reserve your space and should accompany the application. The remaining **\$275** must be paid **no later than May 1**. All registrations submitted after May 1, if spaces are available, must include the full payment along with the separate key deposit check.

Checks payable to: EXTRA MAN

Return to: SUPER SOPHS LACROSSE CAMP • 2497 Biglerville Rd. Gettysburg, Pa. 17325

For Information Call: Carl Runk 410-329-6082 or Hank Janczyk 717-677-9458

Emergency phone during camp: 717-337-6405